

GEORGIA VOCATIONAL REHABILITATION AGENCY

# VOCATIONAL REHABILITATION REVIEW

**FINAL REPORT**

JANUARY 31, 2020



# OUTLINE



## 1 EXECUTIVE SUMMARY

## 2 RESEARCH METHODOLOGIES

## 3 ASSESSMENTS | OBSERVATIONS | RECOMMENDATIONS

## 4 ROADMAP & NEXT STEPS

## 5 APPENDIX



# EXECUTIVE SUMMARY

PROJECT OVERVIEW  
STATE COMPARISON  
PROJECT APPROACH  
WHAT WE LEARNED  
SUMMARY OF OBSERVATIONS  
SUMMARY OF RECOMMENDATIONS

## GVRA



GEORGIA VOCATIONAL  
REHABILITATION AGENCY

# PROJECT OVERVIEW

Accenture conducted the GVRA VR assessment over a period of sixteen weeks from October 7, 2019 – January 31, 2020.






## WHY NOW?

- **RESTORE THE CLIENT TO THE CENTER** of the agency's mission, structure, and processes
- **ASSESS VR STRUCTURAL, TRAINING, WORKLOAD, WORKFLOW, AND STAFFING ISSUES** raised throughout and after the Administrative Assessment submitted in July 2019
- **RESPOND TO GOVERNOR KEMP's** budget discipline measures in Fiscal Years 2020 and 2021
- **PROVIDE MEANINGFUL DATA, ANALYSIS, AND RECOMMENDATIONS** to new GVRA leadership and their mandate to restore the Agency's focus on client services and field offices.
- **REPAIR ORGANIZATIONAL AND LEADERSHIP STRUCTURE** that has seen multiple changes and turnover in the last seven years.

## PROJECT OBJECTIVES

- **PERFORM FULL PROCESS EVALUATION** of all Vocational Rehabilitation (VR) functions, looking for inefficient and ineffective processes.
- **IDENTIFY DUPLICATIVE OR UNNECESSARY ROLES** within the VR organizational structure.
- **REFORM SERVICE** through **DATA DRIVEN** VR client evaluation.
- **PROVIDE RECOMMENDATIONS** for new processes and organizational structure of all VR functions.

# HOW GA VR COMPARES TO SURROUNDING STATES

FY 2018 Stats – Number of Clients Served, Successful Closures, and Disability Population*					
State	 GEORGIA	 ALABAMA	 FLORIDA	 NORTH CAROLINA	 SOUTH CAROLINA
Disability Population (ages 18 – 64)	683,467	427,221	1,242,180	728,433	385,560
Total Served	36,002	24,784	46,848	35,292	33,723
Successfully Closed and Employed	2,169	3,479	4,752	5,122	6,605
% of Total Served by Disability Population (rounded)	5%	6%	4%	5%	9%
% of Successful Closures by Total Served (rounded)	6%	14%	10%	15%	20%

- Compared to our neighboring states, Georgia, by far, closes the **lowest** percentage of the client cases for the population it serves.
- While North Carolina and Georgia have similar populations with disabilities, North Carolina manages to close more than double what Georgia does.
- Despite its significantly smaller disability population, South Carolina serves almost the same number of clients as Georgia, but *more than triples* the rate of successful closures.

# APPROACH

Accenture conducted interviews, workshops, and operational reviews to identify a set of recommendations for VR to consider.

## LISTEN, LEARN, DISCOVER



Gain an in-depth picture of the VR's operations, its current pain points, and its potential opportunities for improvement.

## EVALUATE AND ENVISION



Develop prioritized list of improvement opportunities and address specific concerns.

## RECOMMEND



Define and validate proposed high-level future state VR organization structure and recommendations.

## ROAD MAP



Design road map for implementation.

- 45 individual interviews
- 10+ workshops with 300+ attendees
- 1500+ responses
- 80+ data Sets

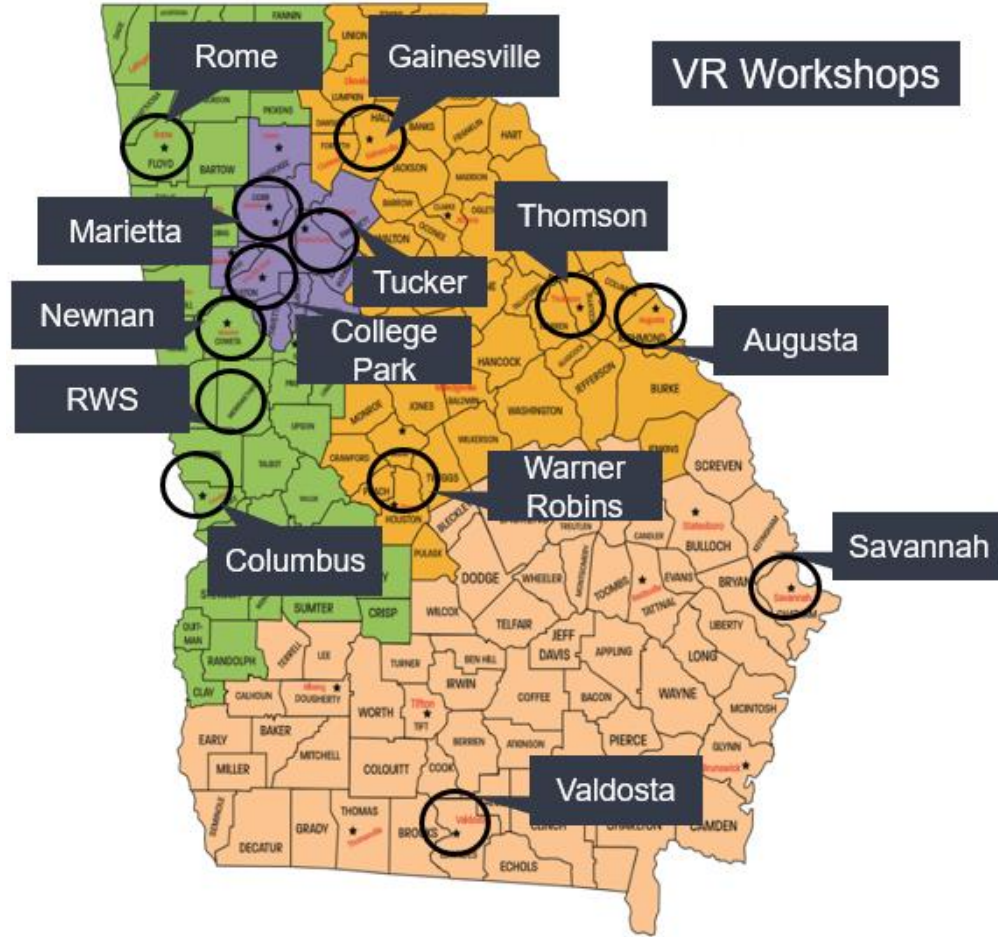
- 100+ total issues initially identified
- Weighed each against an algorithm of efforts and benefits,

- 12 quick wins for VR
- 15 total opportunities for VR

- Road map incorporates feedback from VR leadership



# WHERE WE VISITED



Map source: VR's current quadrant system

## Valdosta



## Rome



## Augusta

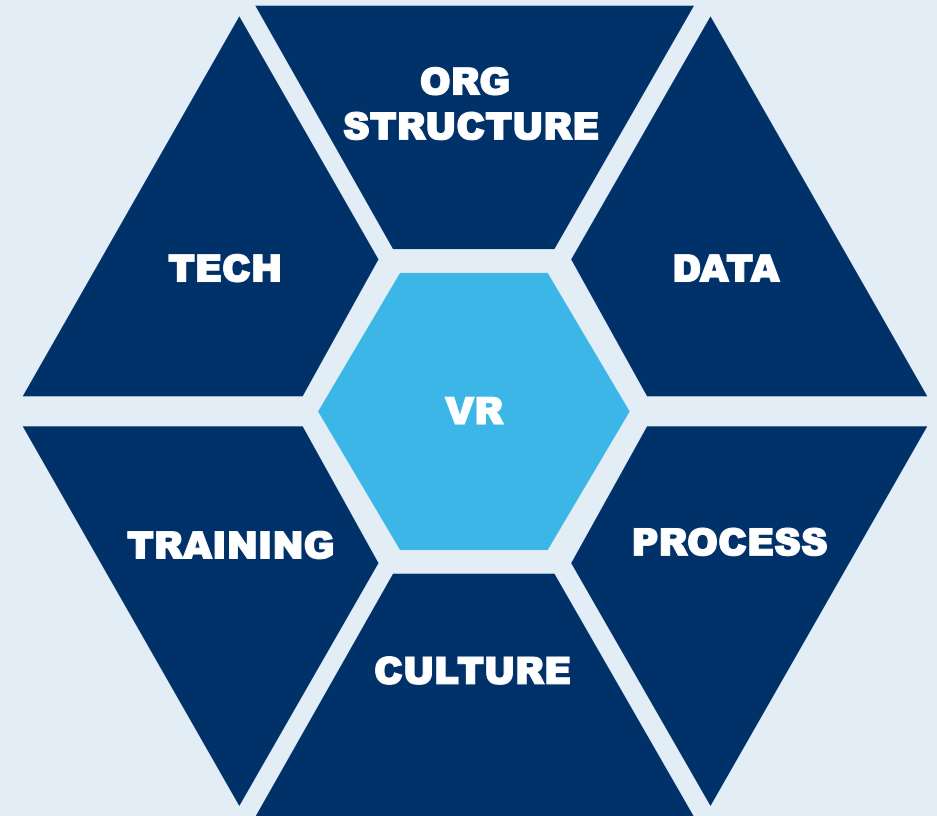


## Newnan



# KEY THEMES

THE CORE CHALLENGES SHAPED OUR ASSESSMENT, WHICH FALL INTO SIX MAJOR THEMES.

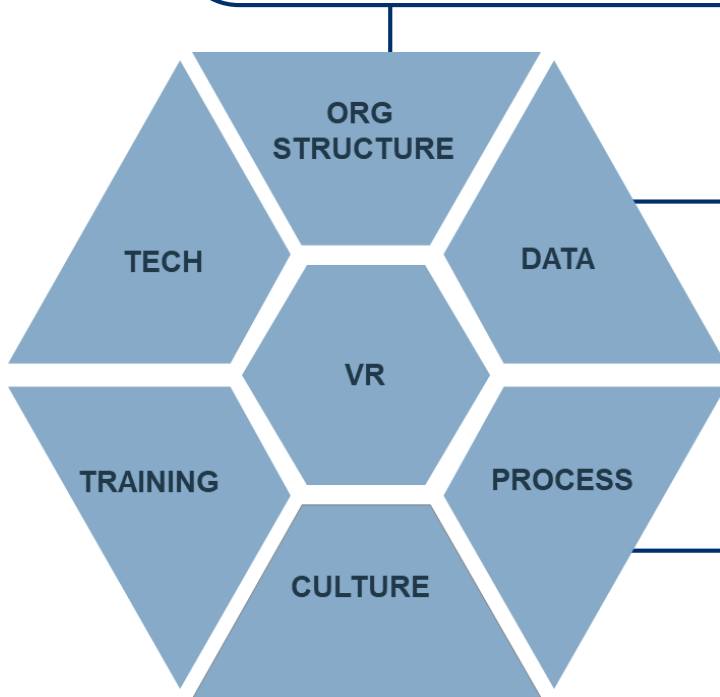




# WHAT WE LEARNED FROM OUR VISITS

Core challenges identified related to organizational structure, data, and process.

- **BLOATED AND TOP HEAVY**, particularly at the mid-management level
- **TEAM MEMBERS ARE INCONSISTENTLY EVALUATED**, and all offices, regardless of caseload, are staffed using a one-size-fits all model
- Staff have **ENDURED MULTIPLE CHANGES TO THEIR ORGANIZATIONAL CHART** and operating model in recent years
- **LACK OF CONSISTENCY, ACCOUNTABILITY, AND TRANSPARENCY** have directly resulted in uneven office management and extreme staff turnover



- **AGENCY DATA IS INCOMPLETE, UNRELIABLE, AND UNAVAILABLE** at a rate that would aid decision-making
- Staff frequently report an **INABILITY TO ACCESS DATA RELATED TO CLIENTS, BUDGETS, AND/OR CASE MANAGEMENT PERFORMANCE**
- Leadership lacks access to quality data, and is **FORCED TO USE UNRELIABLE REPORTS TO MAKE POLICY, STAFFING, AND RESOURCE ALLOCATION CHOICES**

- VR field staff broadly understand the rehabilitation process, but **LACK UNDERSTANDING OF INDIVIDUAL STEPS AND PROCEDURES, PARTICULARLY** when working with outside vendors and providers
- Offices often **CREATE WORKAROUNDS** in order to serve their clients
- The will, passion, and work ethic of front-line staff are strong, but process complexity, **LACK OF EMPLOYEE EMPOWERMENT** and training throughout the process, and lack of teamwork (including leadership) make service provision a challenging task

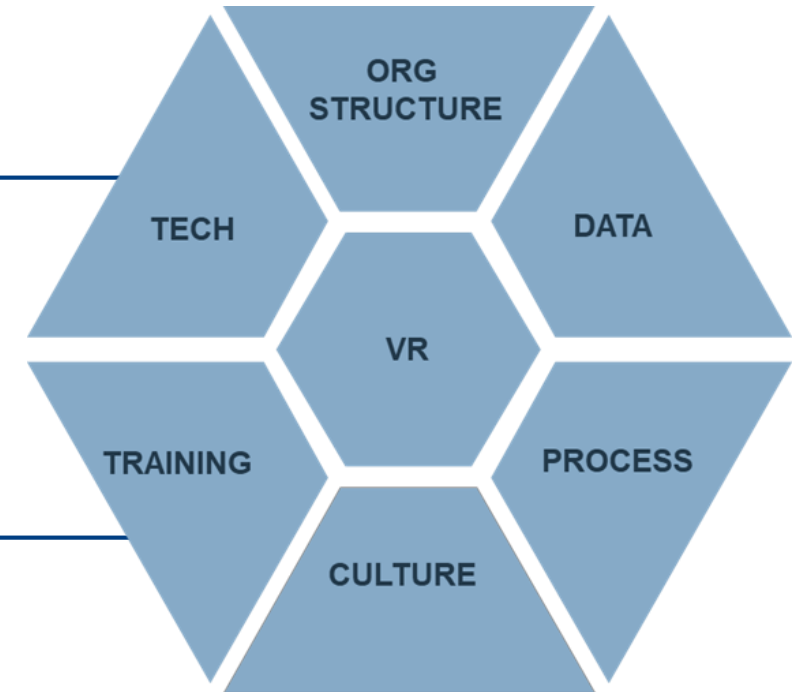
# WHAT WE LEARNED FROM OUR VISITS

Core challenges identified related to technology, training, and culture.

- While VR's Aware system can provide the adequate case management system the agency needs, its **FEATURES ARE UNDERUTILIZED AND INSUFFICIENTLY CUSTOMIZED**
- Moreover, **FIELD STAFF STILL REPORT INADEQUATE TRAINING ON THE SYSTEM** and a general frustration with its interface

- Staff receive **INCONSISTENT AND INSUFFICIENT TRAINING**, related to VR work but also in general VR policy and, where applicable, leadership development
- **LEADERSHIP TURNOVER AND BUDGETARY RESTRICTIONS HAVE PREVENTED ADEQUATE TRAINING**, despite broad organizational understanding of its importance

- While VR's Aware system can provide the adequate case management system the agency needs, its **FEATURES ARE UNDERUTILIZED AND INSUFFICIENTLY CUSTOMIZED**
- Field staff **REPORT INADEQUATE TRAINING** on the system and a general frustration with its interface



# SUMMARY OF OBSERVATIONS

Prominent issues that point to some of the issues facing VR related to service delivery and client outcomes.

## Service Delivery

- No matter the region, VR staff report spending 30% of their time each week just on documentation in VR's Aware case management tool, which is *double* the amount they report spending with clients.
- 80% of VR staff do *not* feel prepared to work with clients with disabilities.
- 63% of VR staff polled believe that VR performs *below average* to *failing* in achieving its mission to help clients find and maintain employment.

## Client Outcomes

- In SFY19, VR successfully found employment for 1,793 Georgians with disabilities. At the same time, 1,369 clients were reserviced – meaning that of the total number of employed clients (1,793) at least 78% of VR clients in FY19 back to VR for more service.
- 22 out of 159 counties had no job-ready clients nor had clients that found employment in the 17.5 months between July 2018 and January 2020.

# SUMMARY OF OBSERVATIONS (CONTINUED)

Prominent issues that point to some of the issues facing VR related to service delivery and client outcomes.

## Impact on the State

- VR closed 43% fewer client cases in 2019 than they did just two years ago in 2017. Despite this decrease in productivity, the savings to the State have remained steady. On average, VR's work annually saves the State ~\$7.5 million in public assistance funds.
- Over the past 5 years, collectively, VR has saved the State roughly \$35 million in public assistance funds, which strongly suggests that a healthy organization could save the State even more.
- In FY19, VR clients collectively cost the State \$10.6 million at the beginning of their VR process and \$2.2 million at the end of their VR process. The data shows that when VR works, it works well; unfortunately, VR's rate of successful employed clients has eroded year over year.

## Provider Relations

- 3 out of 5 comments from staff about providers centered on three core, pervasive problems: an overall lack of providers, a lack of provider accountability, and poor service quality from existing providers.
- 26% of VR staff polled stated that the process of provisioning of services is broken and needs vast, immediate improvement.
- Authorization, invoice, and payment processes within the Provider Relations department are inefficient, such that providers are either delayed in payment or overpaid by VR.
- Vendors and providers have been found to add on VR services without authorization. To exacerbate these issues, there is no designated role within the Provider Relations department responsible for auditing providers.

# SUMMARY OF OBSERVATIONS (CONTINUED)

Prominent issues that point to some of the issues facing VR related to organizational structure, culture, and staff priorities.

## Organization Structure

- VR organization structure is extremely top-heavy, full of an entirely unnecessary layer of middle management.
- The industry standard for manager to staff ratio is 1:8; VR is operating at 1:4.5, and multiple managers/directors have zero direct reports.
- Each department works in its own silos, restricting, if not preventing, collaboration with each other, especially as it relates to successful client outcomes.
- VR is laden with vacancies: 32 out of 36 field offices (89%) have at least 1 staff vacancy; 29 out of 36 field offices (81%) have 2 or more vacancies; and 13 out of 36 field offices (36%) have 5 or more vacancies.

## Culture

- There is no “culture of consistency” among the VR offices; according to those in the field, “Each office is its own fiefdom.”
- When asked, “Describe in a single word how you feel about working at GVRA,” 83% of staff polled responded with a negative word, e.g., frustrated, overwhelmed, exasperated, etc.
- VR has policies in place for each step in the rehab process for clients, but offices frequently execute those steps in different ways, meaning that the process is uneven and inconsistent across the State and, at times, clients “forum shop” among field offices.
- Teamwork is just a buzzword rather than a inculcated concept.



# SUMMARY: KEY VR RECOMMENDATIONS

## Essential Projects for Improvement

## By doing this, VR...

Restructure VR organization at office, regional, and leadership level; create clearer lines of authority, job descriptions, and pay bands for growth opportunities.

Eliminates confusion and duplicative work functions.  
Reduces staff turnover by providing career path forward.

Conduct a statewide training needs analysis, create Learning and Development positions at the regional level, and mandate annual trainings for staff.

Identifies and addresses critical skill and knowledge gaps within VR, improves staff performance, standardization, and policy compliance.

Instill a set of VR core values; encourage real teamwork and measure leaders on their ability to foster it; establish best practices for meetings, communications, and performance management.

Improves trust amongst VR departments, morale, and transparency.

Improve VR's relationships with Vendors by making vendor application, contract, payment, and performance audit more robust and automated.

Increases accountability between VR and providers to deliver more timely and effective services for clients.

Standardize VR rehab process training and execution throughout each office by creating visual (SOPs) that are aligned to steps taken in Aware (Case Management Tool).

Provides consistency in how services are administered to clients VR-wide.

We recommend a total of 27 VR-specific improvement projects, 12 of which are quick wins.

# KEY VR RECOMMENDATIONS

Implementing these essential recommendations addresses critical issues at VR.

Recommendations	Org Structure	Data	Process	Culture	Training	Tech
Restructure VR organization at office, regional, and leadership level; create clearer lines of authority, job descriptions, and pay bands for growth opportunities.	✓	✓	✓	✓		
Conduct a statewide training needs analysis, create Learning and Development positions at the regional level, and mandate annual trainings for staff.	✓		✓		✓	✓
Instill a set of VR core values; encourage real teamwork and measure leaders on their ability to foster it; establish best practices for meetings, communications, and performance management.	✓		✓	✓		
Improve VR's relationships with Vendors by making vendor application, contract, payment, and performance audit more robust and automated.	✓	✓	✓		✓	✓
Standardize VR rehab process training and execution throughout each office by creating visual SOPs that are aligned to steps taken in Aware (Case Management Tool).		✓	✓		✓	✓

# SUMMARY: ESTIMATED TIME TO IMPLEMENT

## Essential Projects for Improvement

## Estimated Times for Implementation\*

Restructure VR organization at office, regional, and leadership level; create clearer lines of authority, job descriptions, and pay bands for growth opportunities.

3-6 months

Conduct a statewide training needs analysis, create Learning and Development positions at the regional level, enhance Learning Management System capabilities, and mandate annual trainings for staff.

9-12 months

Instill a set of VR core values; encourage real teamwork and measure leaders on their ability to foster it; establish best practices for meetings, communications, and performance management.

9-12 months

Improve VR's relationships with Vendors by making vendor application, contract, payment, and performance audit more robust and automated.

9-12 months

Standardize VR rehab process training and execution throughout each office by creating visual SOPs that are aligned to steps taken in Aware (Case Management Tool).

6-9 months

*\*This timeline is based on when the project's start date, not upon delivery of this report..*

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# RESEARCH METHODOLOGIES

FOUR RESEARCH  
METHODOLOGIES WERE USED TO  
EXPLORE THE CURRENT STATE OF  
VR.



**13 DESIGN  
THINKING  
WORKSHOPS**



**240 LIVE-  
POLLING  
RESPONSES**



**45 INDIVIDUAL  
EMPLOYEE  
INTERVIEWS**



**ACCENTURE  
INSIGHTS  
PLATFORM**





Design Thinking provides a dynamic and action-oriented approach to solving problems.

Design Thinking provides a dynamic and action-oriented approach to solving problems.

During the workshops, VR team members were involved in different activities that prompted them to think about the rehabilitation process and identify its positives and negatives, as well as opportunities to improve.

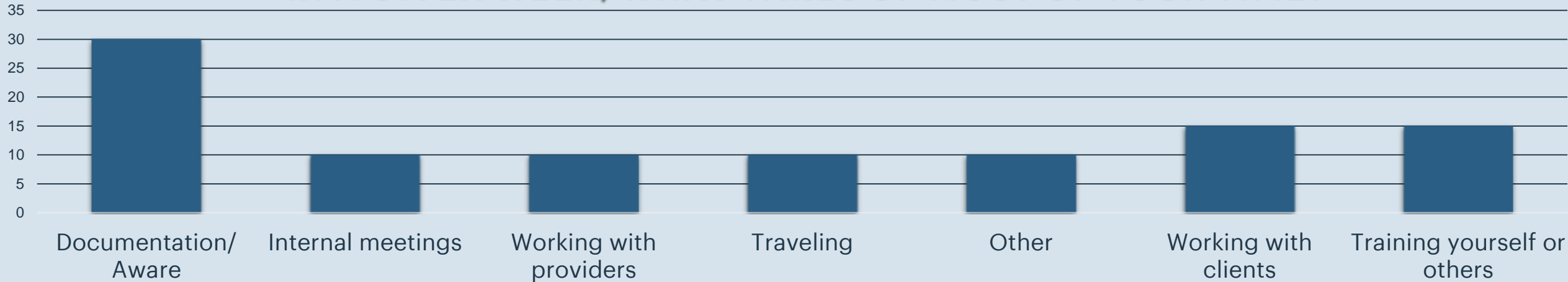
In each workshop, we worked with those in attendance to find common themes and used those themes to brainstorm solutions.



During the assessment, 13 Design Thinking Workshops conducted around the State generated 1,500+ responses (see above).

The responses and solutioning activity outcomes were used to validate and originate recommendations.

## IN A GIVEN WEEK, WHAT TAKES UP MOST OF YOUR TIME?



## LIVE POLLING

During the Design Thinking Workshops the staff participated in live polls that were focused on culture, training, communication, and employee morale.

### How it was gathered

During the workshops, VR employees and VR service providers were asked questions using a live polling tool (Menti).

The answers were shown on a screen so participants could see the responses in real time. We saved and aggregated the responses. A complete readout from these polls may be found in Appendix B.



### How it was used

The ability to live poll the participants and have the results visible in real time allowed participants to anonymously reply and view others' responses. This was used as an ice breaker to get conversations going.

The data collected from the live polling was aggregated and used to validate and originate recommendations.



# INTERVIEWS

Individual interviews with a wide variety of VR leaders and field office staff were conducted around the State.

## How it was gathered

Individuals were interviewed and asked specific questions around their experience, challenges, opportunities, and opinions on how VR helps Georgians with disabilities find gainful employment.



## How it was used

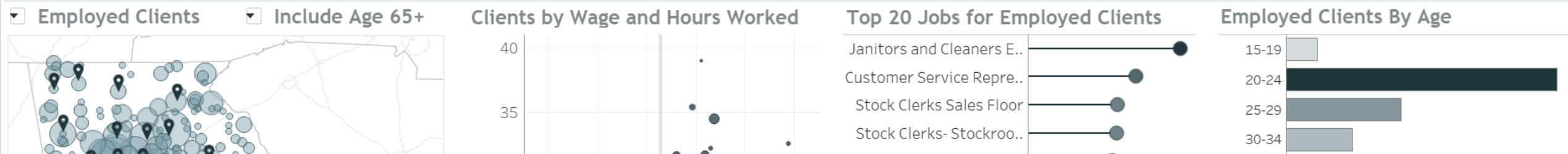
During the assessment 45 interviews were conducted.

The information gathered was aggregated and used to validate and originate recommendations.



	Number of Employed Clients	Average Age	Average Hours Worked	Average Wage
Georgia	1,781	34.0	29.6	\$10.56

## Number of Employed Clients By Office



# ACCENTURE INSIGHTS PLATFORM

The Accenture Insights Platform is collection of over 500 discrete data points from 50 data sources that includes local, federal, and third-party data.

## How it was gathered

Accenture worked with VR to combine local and federal publicly available data, third-party purchased data, VR budget data, and VR case management (Aware) data.



## How it was used

The Insights Platform was used to influence recommendations around organizational redesign, future planning, current client profiles, budgetary controls, agency efficiency, and resource allocation.



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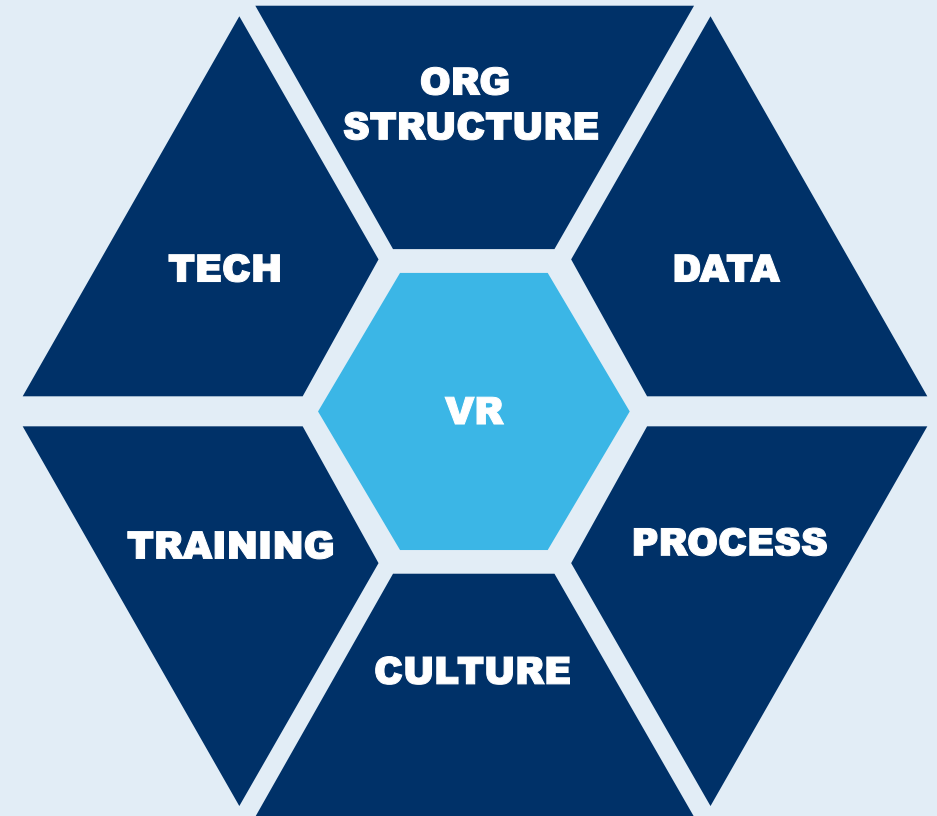




# KEY THEMES

THE DISCOVERY PHASE REVEALED CHALLENGES AND OPPORTUNITIES FOR CHANGE, WHICH FALL INTO SIX MAJOR THEMES.

THIS SECTION DETAILS FINDINGS FOR EACH ONE.



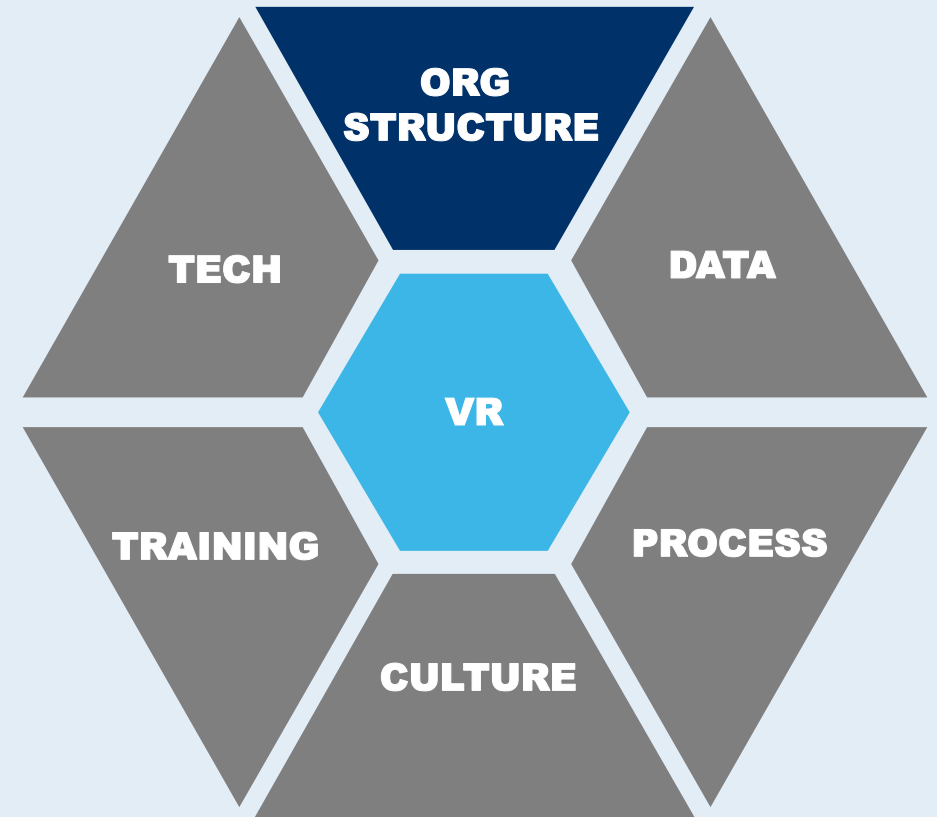
# ORGANIZATIONAL STRUCTURE

**VR IS LADEN WITH VACANCIES:**

**32 OUT OF 36 FIELD OFFICES (89%) HAVE  
AT LEAST 1 STAFF VACANCY.**

**29 OUT OF 36 FIELD OFFICES (81%) HAVE  
2 OR MORE VACANCIES.**

**13 OUT OF 36 FIELD OFFICES (36%) HAVE  
5 OR MORE VACANCIES.**



# RECOMMENDED ORGANIZATIONAL BENEFITS

Restructuring the VR organization and reducing the number of silos at the management, regional, and department level will put the client back in the center.

## Reinforce core roles

- The recommended organizational chart eliminates unnecessary management and repurposes those positions for the direct benefit of clients, i.e., at the local office level.

## Clear reporting structure

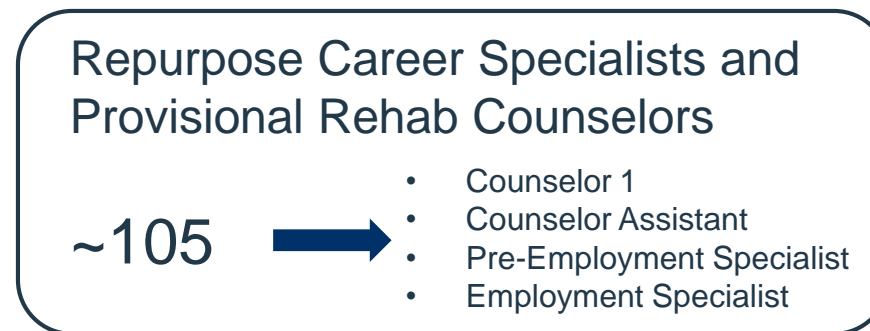
- All staff in a local office reports to the office Supervisor. All staff except the HR Rep in a district office report to the District Manager.

## One less management layer

- Team Leads, Service Area Managers, and Assistant Field Directors responsibilities overlapped and created confusion for staff on who to reach out to when escalation was necessary. The recommended organizational chart condenses three positions to two, a Supervisor and a District Manager.

## Clearly defined roles

- Clearly defined roles that have their core functions embedded in their names. Pre-Employment Specialist, works with clients before employment on job readiness skills and PTS curriculum. Employment Specialist, works with clients ready for employment. Counselor Assistants, assist the counselors with clerical and administrative duties.



# CURRENT ORGANIZATIONAL ISSUES

VR's organizational chart has unclear reporting lines and role descriptions.

## **Middle Management is bloated and top heavy**

- Three layers of middle management exist in VR's current structure. The Team Lead, Service Area Manager, and the Assistant Director of Field Services roles blend together, perform duplicative duties, and add unnecessary administrative burdens to the process and for the team.
- The multiple layers of management delay approvals, feedback, performance evaluations, and client service and generally create confusion for staff who simply want to know where to go for answers.

## **Offices and support functions are siloed**

- Lack of consistency, accountability, and transparency within individual offices create office specific work-arounds, standards, and performance achievement metrics, resulting in poor and non-standard customer service and employee operations.
- Support functions are utilized differently from office to office, if at all. Support functions are often brought into the VR process late, with no standard handoff of information. Support function recommendations have little authority and are often overlooked.

## **Lack of role clarity**

- "I would be glad to be measured on how well I do my job, but I don't know what I'm supposed to do." Lack of role clarity throughout VR has caused extreme staff turnover, insufficient training, ineffective performance management, unclear work capacity, a shield for underperforming staff, and general exasperation among field staff.

*\*VR presently has competing and conflicting sets of data relative to its employees: one from Human Resources (Active Detail Report) and from each unit (Org chart 9/30/2019). The attrition rate within the agency is also a factor in vacancies and number of FTE's. We have reconciled these differences to the best of our ability.*

# ORGANIZATION CHART - CURRENT STATE

VR's organization is needlessly complex, featuring too many layers, too many manager-level positions, and not enough clarity on roles and responsibilities.

## Current Issue: Managerial Bloat

- Ineffective performance management and inaction on moving bottom-performing managers "out" of the organization.
- Tenure-based promotions and the use of title promotions drive up compensation increases.
- An excessive number of management layers for few workers.

### ALL SUPERVISORS, MANAGERS AND ABOVE CURRENTLY WITHIN VR

The circled area below shows overlapping duties and responsibilities between Service Area Managers and Assistant Field Services Directors.



## Current VR Organizational Stats

- Manager to Staff Ratio = 1 to 4.5
- Number of Management Layers = 6



## Transaction/Operational Org Benchmarks to Aim For

- Manager to Staff Ratio = 1 to 8
- Number of Management Layers = 5



# KEY CHANGES WITH RECOMMENDED ORGANIZATION

## Management

- Repurpose the following roles: Directors, Assistant Directors, Service Area Managers, and Team Leads.

## Staff

- Repurpose the following roles: Career Specialist, Provisional Rehab Counselor, and Rehabilitation Casework Associate.

## Reporting/Geographical

- Reduce Directors and Assistant Directors to **4 Assistant Directors** – Transition Services, Client Services, Programs, and Provider Relations.
- Transition from 4 Quadrants to 8 Districts with **8 District Managers** to manage all staff and performance metrics within a district.

## Support Functions

- Recommend functional Coordinators who provide support and subject matter expertise in the following VR areas: AWT, Training & Development, Employment Services, Behavioral Health and Developmental Disabilities, Deaf Services, Blind Services, and Transition.
  - Coordinators are peers to the District Managers.

## Programs

- Move Ticket to Work team to Fiscal Ops – Program Initiatives Manager and Regional Initiatives Coordinators.

# ORGANIZATIONAL ISSUES AND RECOMMENDATIONS BREAKDOWN

Detailed current state office facts can be found in Appendix F.

Based on the current VR organization structure, interviews with VR staff, and industry standards, we present the following recommendations for a VR reorganization:

## Leadership/Management

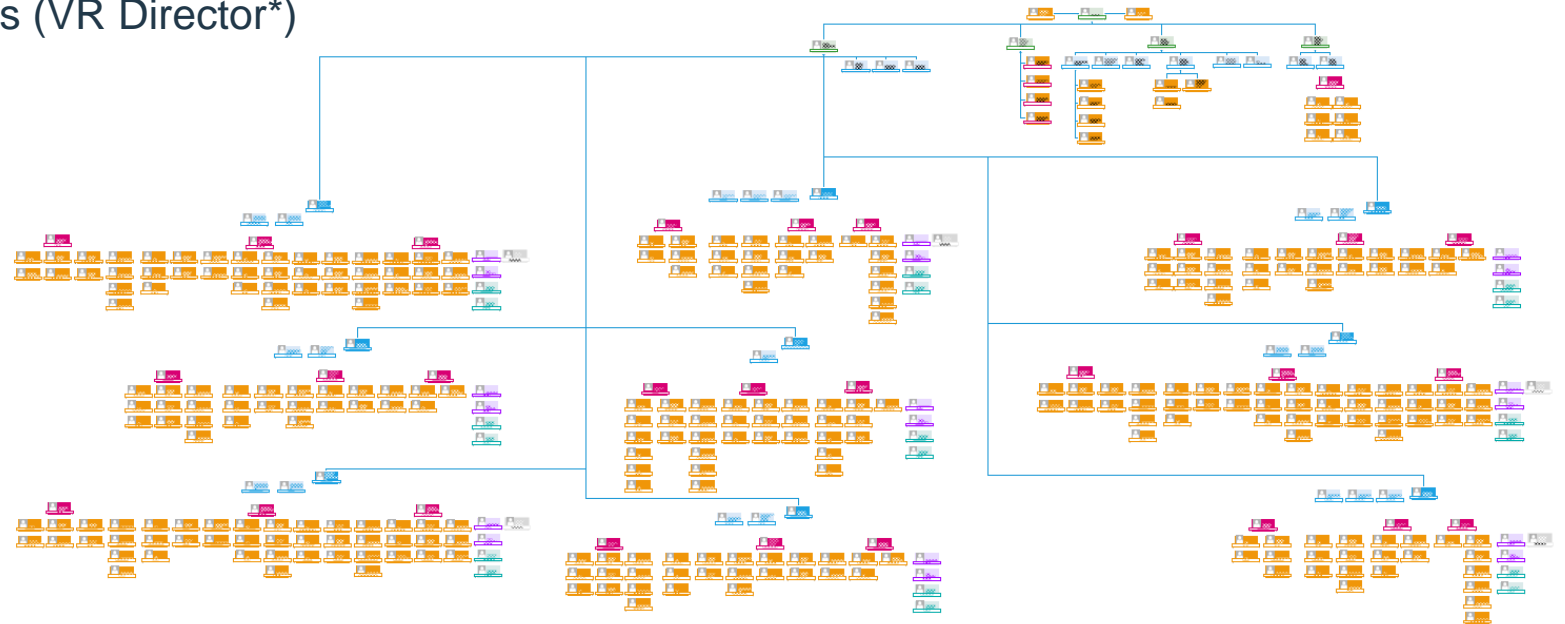
- Executive Deputy Director of Services (VR Director\*)
- Transition Services
- Provider Relations
- Programs
- Client Services

## Middle Management

- Decreasing management bloat

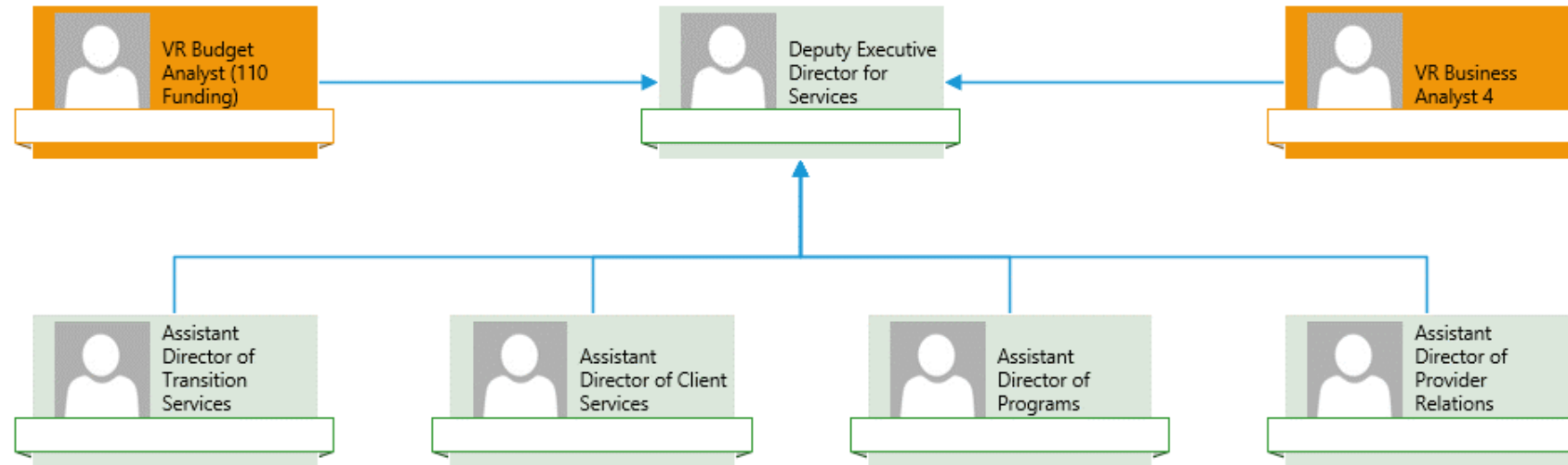
## Client Services

- District Allocation
- District Office
- Local Office
- Career Paths



*\*The Phase 1 report recommended that the VR Director title change to Executive Deputy Director of Services. For the purpose of this report, those titles are synonymous.*

# RECOMMENDED VR LEADERSHIP STRUCTURE



## Current Issues

- Deputy Executive Director for Services has 8 Director roles reporting up.
- VR reporting is underutilized and under distributed.
- VR has little to no visibility into budget spend.

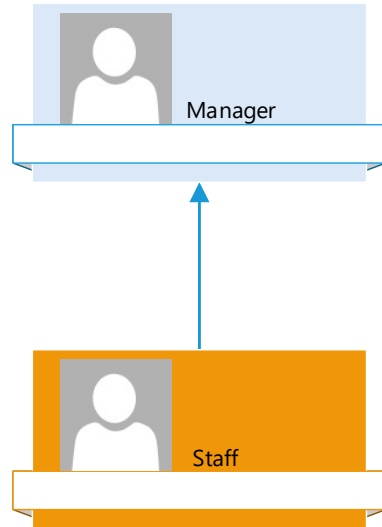


## Recommended Changes

- Reduce to four Assistant Director Roles: Transition Services, Client Services, Programs, and Provider Services.
- The four Assistant Director Roles are aligned to VR's focus areas.
- Add VR Business Analyst IV (Reporting).
- Add VR Budget Analyst (110 Funding).

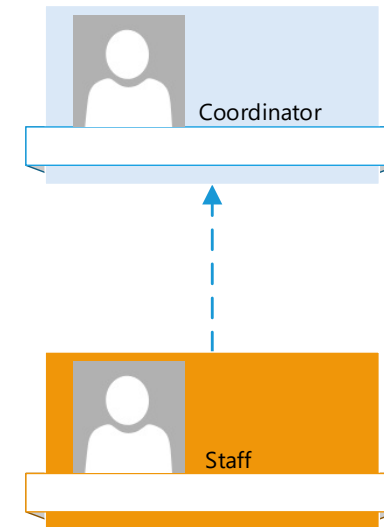
# RECOMMENDED CHANGES TO REPORTING STRUCTURE

Managers compared to Coordinators and how they interact with staff.



## Manager/Supervisor

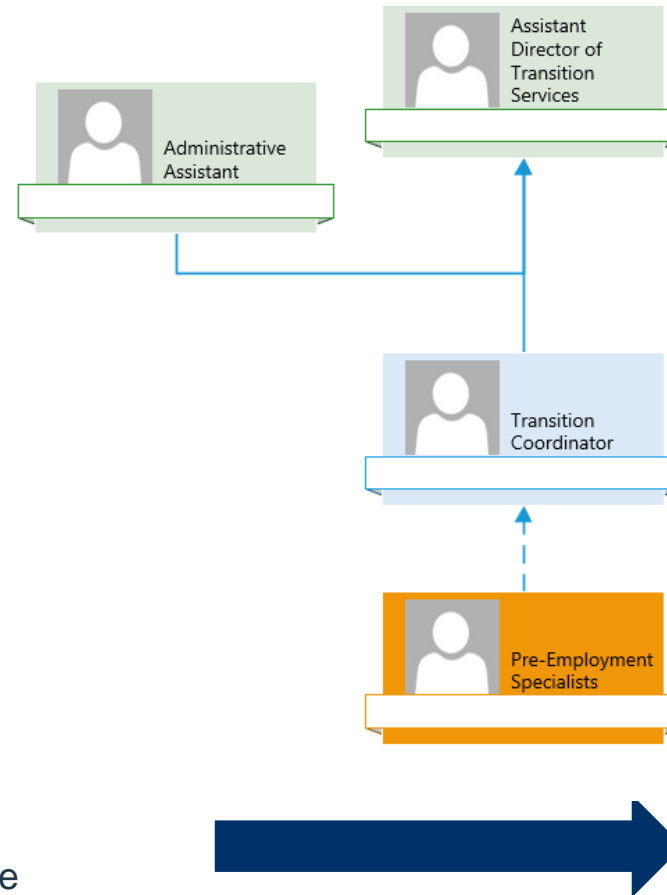
- Directly manages staff within area of responsibility.
- Responsible for day to day operations and staff goals.
- Responsible for performance evaluations and disciplinary actions.



## Coordinator

- Agency subject matter expert within their specialty field.
- Responsible for creating training and expectations within their specialty field.
- The dotted line means that staff within the specialty field do not directly report to the Coordinator; however, the Coordinator will have inputs into performance evaluations based on how the staff have impacted the specialty field and worked with their peers in the agency.

# RECOMMENDED TRANSITION SERVICES STRUCTURE



## Current Issues

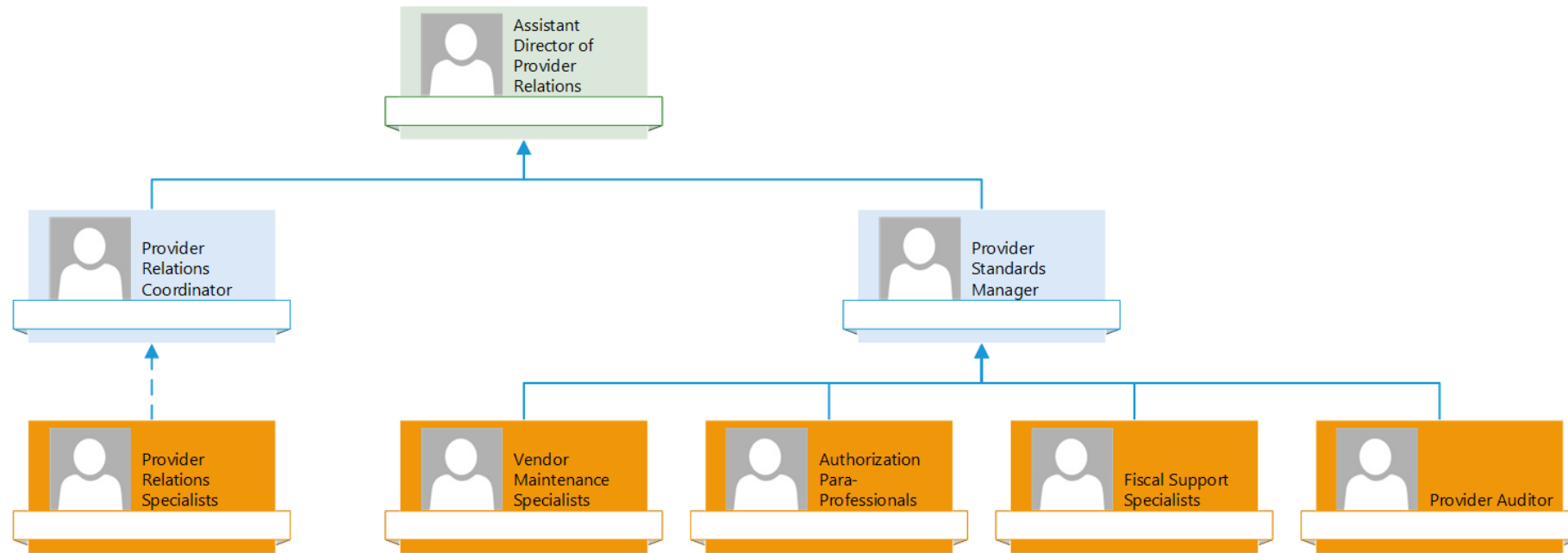
- Transition Services does not have a designated role to complete Transition objectives at the local office level.
- Little coordination between offices on the best way to serve Pre-employment Transition Services (PTS) clients.

## Recommended Changes

- Add Transition Coordinator who is a subject matter expert on PTS clients and have a dotted line to Pre-Employment Specialists at offices.
- Pre-Employment Specialists are responsible for job-readiness duties and PTS duties.



# RECOMMENDED PROVIDER RELATIONS STRUCTURE



## Current Issues

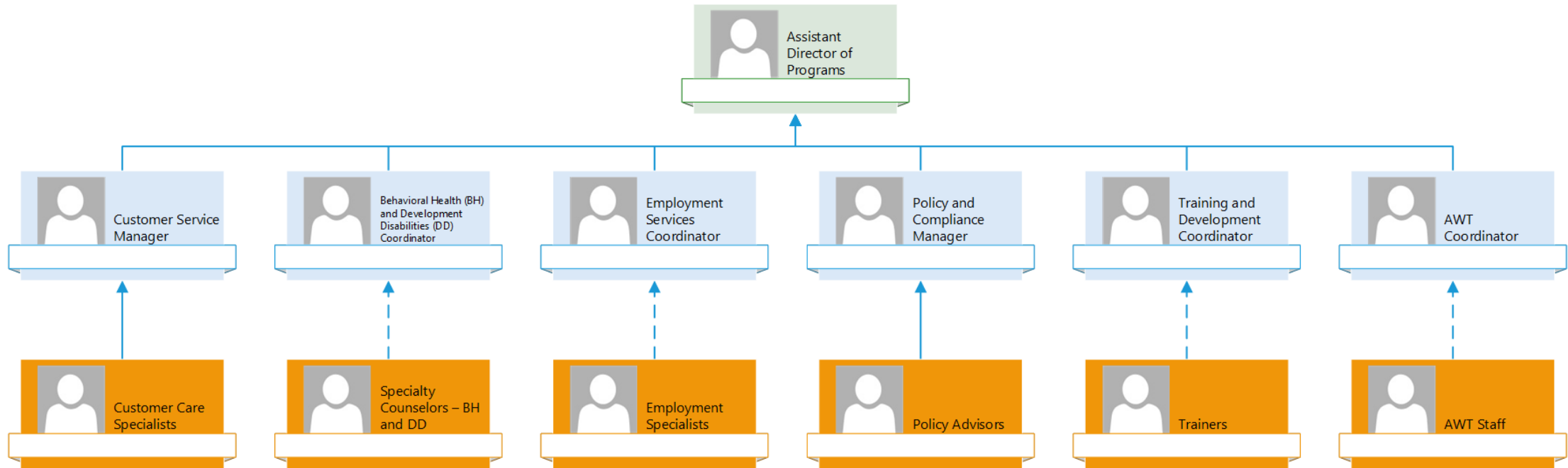
- A majority of counselors' time goes to dealing with Provider issues when it should be handled by Provider Relations dept.
- No standardized information sharing regarding Providers for Counselors.
- Provider Relations has limited interaction with staff.
- There is little Provider oversight after the contracts are initiated and services are provided.



## Recommended Changes

- Add Provider Standards Manager who manages Provider budget in Aware.
- Add Provider Relations Specialist who works at the district level with staff.
- Add Provider Relations Coordinator who coordinates training and resources for Provider Relations Specialists.
- Add Provider Auditor who reviews Provider contracts, spending and performance.

# RECOMMENDED PROGRAMS STRUCTURE



## Current Issues

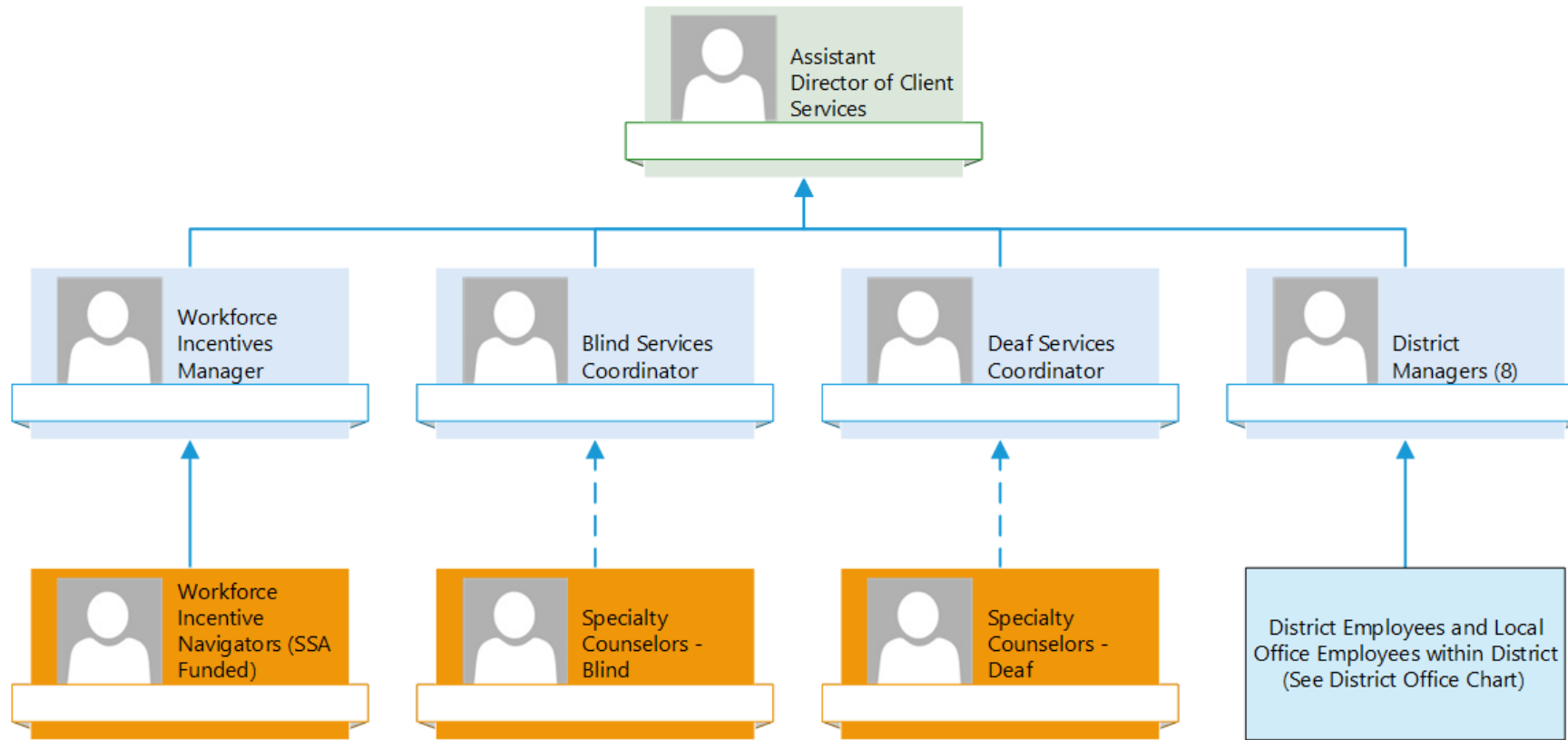
- Training department is understaffed and ineffective.
- Employment Consultants are underutilized and not incorporated into the VR process.



## Recommended Changes

- Increase Training and Development staff and Trainers at the District level working with staff.
- Move Policy and Compliance and Customer Service departments under the Assistant Director of Programs.
- Add Behavioral Health (BH) and Developmental Disability (DD) Coordinator that is a peer to District Managers and a dotted line to specialty Counselors at offices.
- Add Employment Services Coordinator that is a peer to District Managers and a dotted line to Employment Specialists at offices. Consider removal/repurpose of roles outside Employment Services Coordinator and Employment Specialists.
- Add AWT Coordinator that is a peer to District Managers and dotted line to AWT team at offices.

# RECOMMENDED CLIENT SERVICES STRUCTURE



## Current Issues

- Lack of role clarity and accountability in due to silos, leaving clients behind.
- Miscommunication from the top down.
- Unclear reporting structure within middle management.
- Specialty CRC's are underutilized and often handle cases outside their specialty.



## Recommended Changes

- Remove one layer of management.
- Create clear reporting structure from local office level to District Managers.
- Align Blind and Deaf Coordinators to Specialty Counselors that act as a peer to the District Managers. Blind and Deaf Coordinators will help manage specialty counselors working on specialty clients at offices.

# RECOMMENDED SPECIALTY CASE MANAGEMENT

## Specialty CRC Placement

- The placement of specialty CRC's should be based on the disability population within Georgia, which is centralized around major metropolitan areas.

## Case Distribution and Capacity

- The Supervisor will distribute specialty cases to staff accordingly and escalate capacity issues to the District Manager. The District Manager will direct cases to staff with capacity, if available. If the district is at capacity, the District Manager will reach out to the Specialty Coordinator to see if there is capacity around the other districts that could help remotely. If the agency is at capacity for specialty cases the Specialty Coordinator will lobby for additional resources and where they will be staffed.

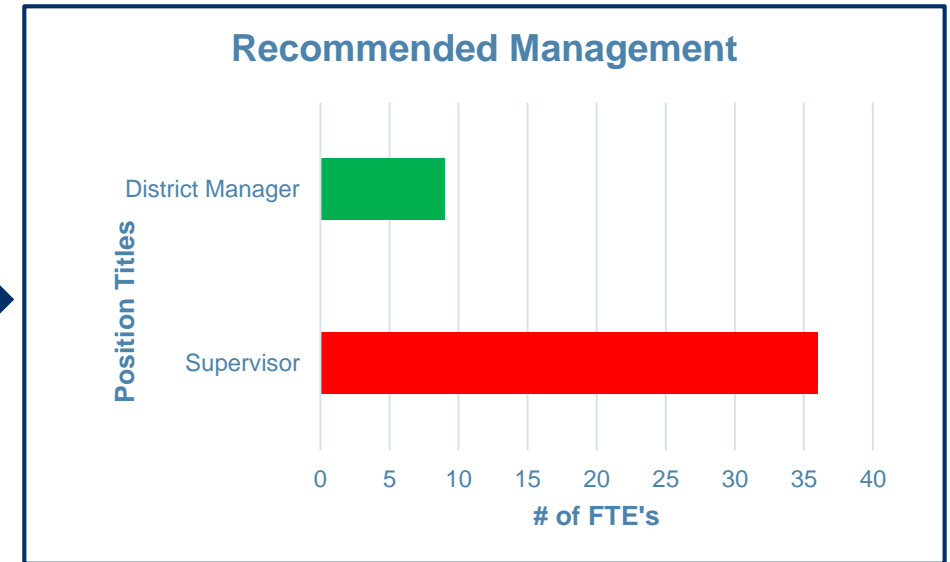
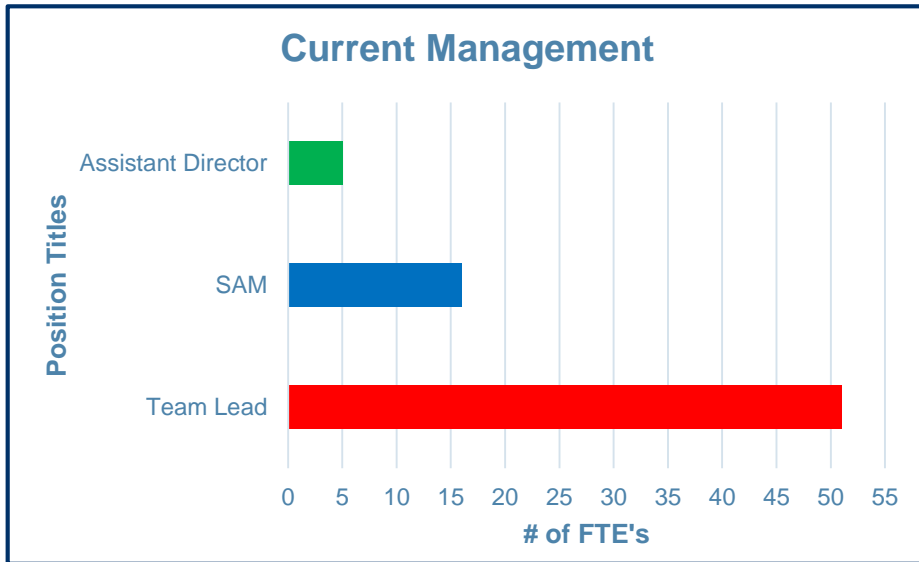
## Case Quality and Training

- The Specialty Coordinator will audit case quality for Specialty Counselors and distribute feedback.
- The Specialty Coordinator will distribute/administer training and best practice news letters to Specialty Counselors. They will also be available for questions directly from Specialty Counselors.

## Performance Evaluations

- The Specialty Counselors report to the Supervisor of the office where they are staffed. The Specialty Counselors will be evaluated on individual metrics and office metrics by the Supervisor, they will be evaluated on functional metrics by the Specialty Coordinator.

# MULTIPLE LAYERS OF MIDDLE MANAGEMENT



## Current VR Organizational Stats

- Manager to Staff Ratio = 1 to 4.5
- Number of Management Layers = 6

## Current Issues

- Assistant Directors and Service Area Managers (SAM) have duplicative duties and duplicative responsibilities.
- Team Leads are asked to perform a supervisory role and handle a case load which inhibits them from effectively performing both roles.
- Roles that are a part of the rehab process are all siloed off and not centered around their client and office.



## Recommended VR Organizational Stats

- Manager to Staff Ratio = 1:7.9
- Number of Management Layers = 5

## Recommended Changes

- Remove one layer of management
- Require Coordinators at the district-level (except HR Rep) report directly to their District Manager.
- Require Supervisors not handle client case loads. All local office staff report directly to their office Supervisor.

# RECOMMENDED GEOGRAPHICAL STRUCTURE

## Current Issues

- The current VR geographical structure is divided into quadrants and then furthermore into service areas within those quadrants, meaning that fifteen different middle management offices exist across the State.
- The extra layer of management creates yet another level of bureaucratic process and approval for almost anything, as well as general staff confusion as to where they should turn for answers.
- Even with significant numbers of middle managers, timely feedback and case supervision/oversight is spotty at best, largely because these managers must backfill the vacancies prevalent in many offices.
- The sheer size of the quadrants necessitates lengthy travel times, increasing costs and decreasing productivity.
- The size of the quadrants hinder staff ability to collaborate and coordinate.
- Timely, accurate reporting, in general, is poor, and the size of the quadrants decreases management's ability to pinpoint issues within a quadrant.



## Recommended Changes

- Divide the State into eight districts based on projected disability population (2030), caseloads, travel times, and present field office locations.
- Assign one manager position per district who is responsible for all staff and outcomes within that district.
- Tailor budget and Aware reports to the district level (office level ideally) and give district managers access to those reports.
- Designate eight District "headquarters" offices.
- Support function staff report to the district manager and are readily available to the offices within the district. The support function staff do not necessarily have to sit in the District office.



# RECOMMENDED DISTRICT ALLOCATION

## District 1

- \*Rome
- Lafayette
- Canton
- Dalton
- Cleveland
- Ellijay

## District 2

- \*College Park
- Newnan
- Carrollton
- Marietta
- Dallas
- Douglasville

## District 5

- \*Columbus
- Macon
- LaGrange
- Perry/Warner
- Robins
- Americus

## District 7

- \*Albany
- Tifton
- Valdosta
- Thomasville

## District 3

- \*Tucker
- Norcross
- Griffin

## District 4

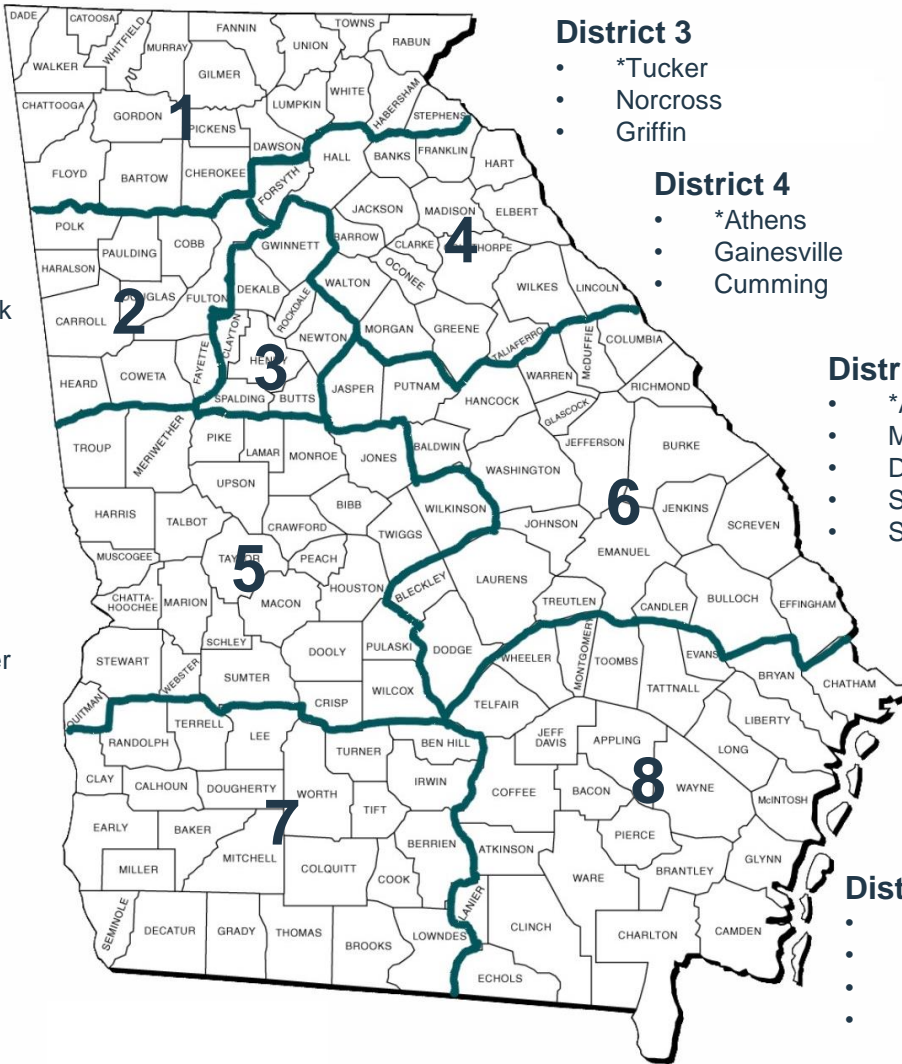
- \*Athens
- Gainesville
- Cumming

## District 6

- \*Augusta
- Milledgeville
- Dublin
- Statesboro
- Swainsboro

## District 8

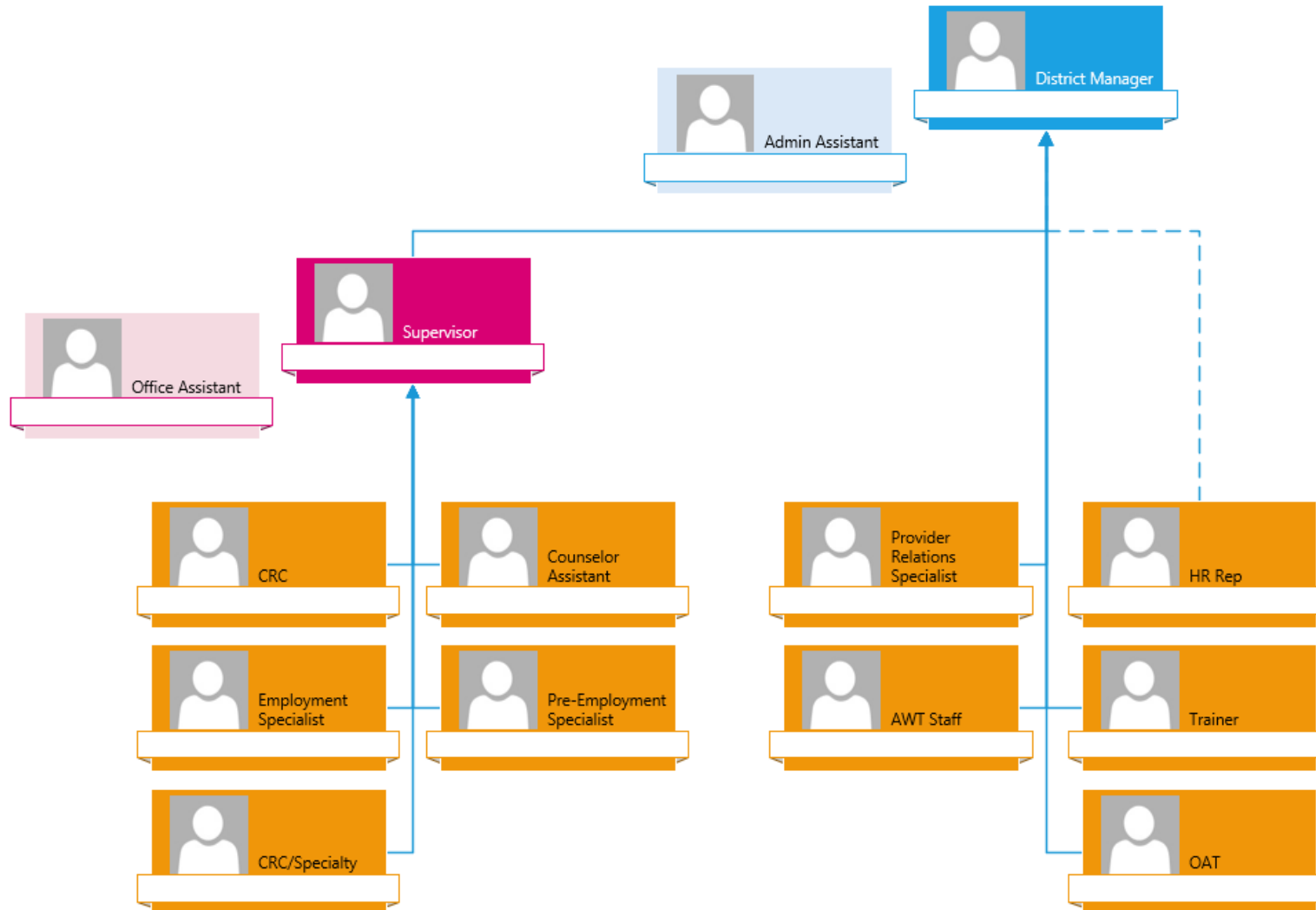
- \*Savannah
- Brunswick
- Reidsville
- Waycross



District Information						
District	Sq. Miles	Projected Population (2030)			Open Cases	No. of Offices
		Disability	Hearing	Vision		
1	6,655	169,634	29,253	28,678	2,743	6
2	3,440	873,417	46,714	51,344	5,096	6
3	1,977	494,782	42,666	94,739	2,916	3
4	5,367	152,268	23,126	21,969	2,362	3
5	9,254	135,821	21,812	23,242	2,083	5
6	10,485	202,285	18,631	19,576	2,208	5
7	9,426	62,907	12,039	16,349	1,652	4
8	12,737	109,816	22,013	23,216	868	4

Note: Offices marked with \* suggested District headquarters.

# RECOMMENDED DISTRICT OFFICE STRUCTURE AND REPORTING STRUCTURE



## Current Issues

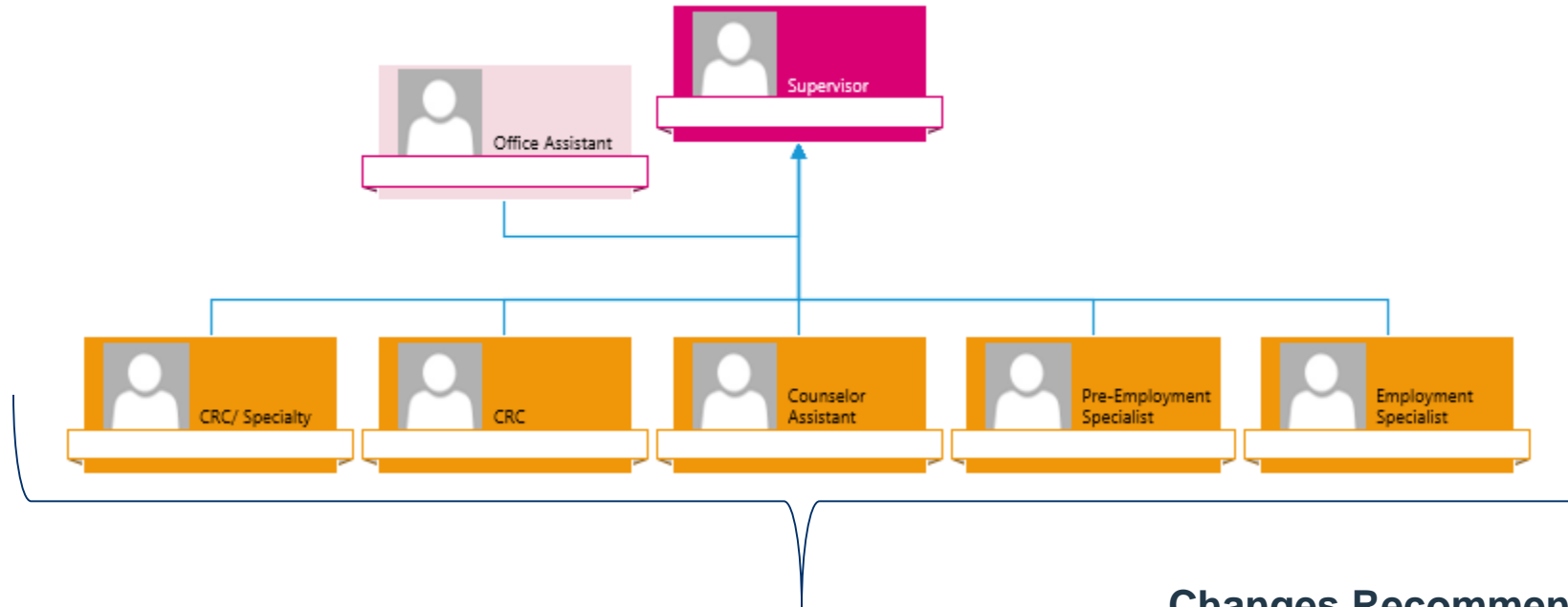
- Support function staff work in local offices but do not report to anyone within their office which lowers accountability.
- Work is divided by functions rather than outcomes and is not centered around the client.



## Recommended Changes

- All staff in the district office report directly to the District Manager (except for HR Rep).
- Support function staff are readily available to local offices within the district.

# RECOMMENDED LOCAL OFFICE STRUCTURE



## Current Issues

- Lack of role clarity for local office staff.
- Team Leads serve as case management leads, trainer, supervisor and office manager which is a lot to handle.
- Employment Consultants are viewed as third-party contractors and not part of the local office, thus impacting client employment outcomes.
- There is no designated staff role to help clients with job readiness.

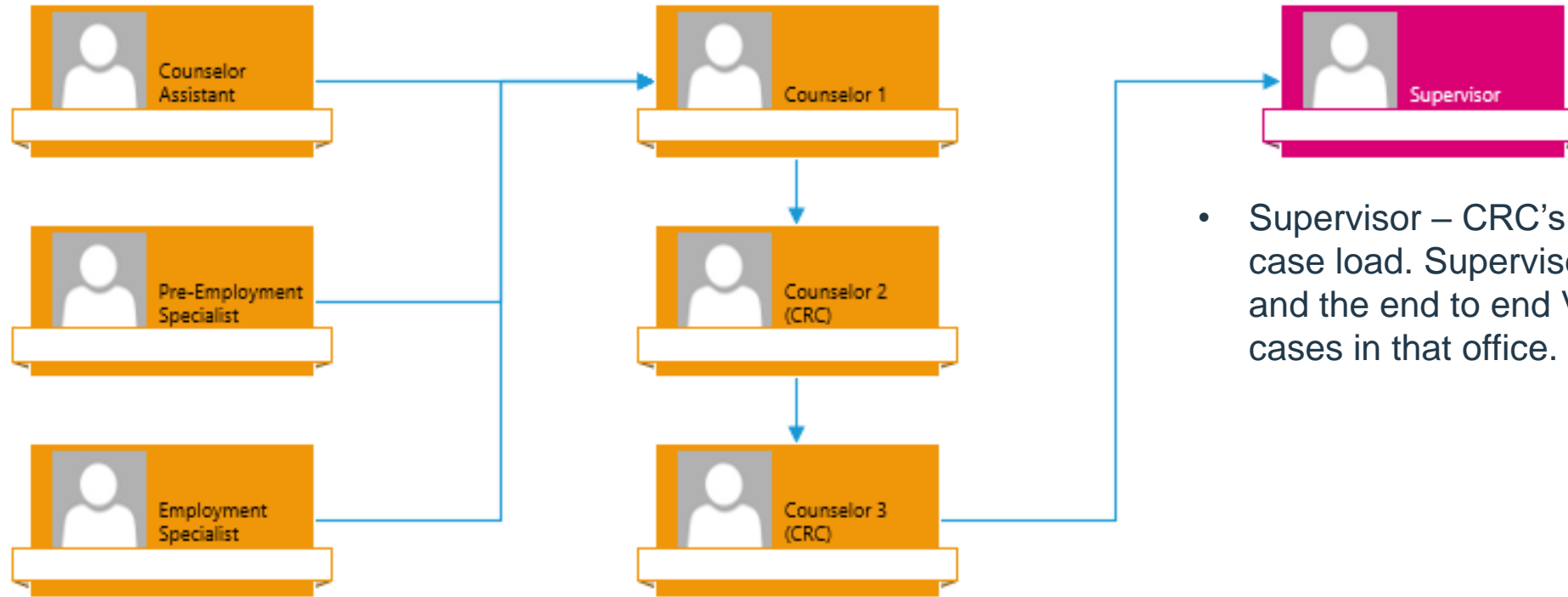
Counselor Series



## Changes Recommended

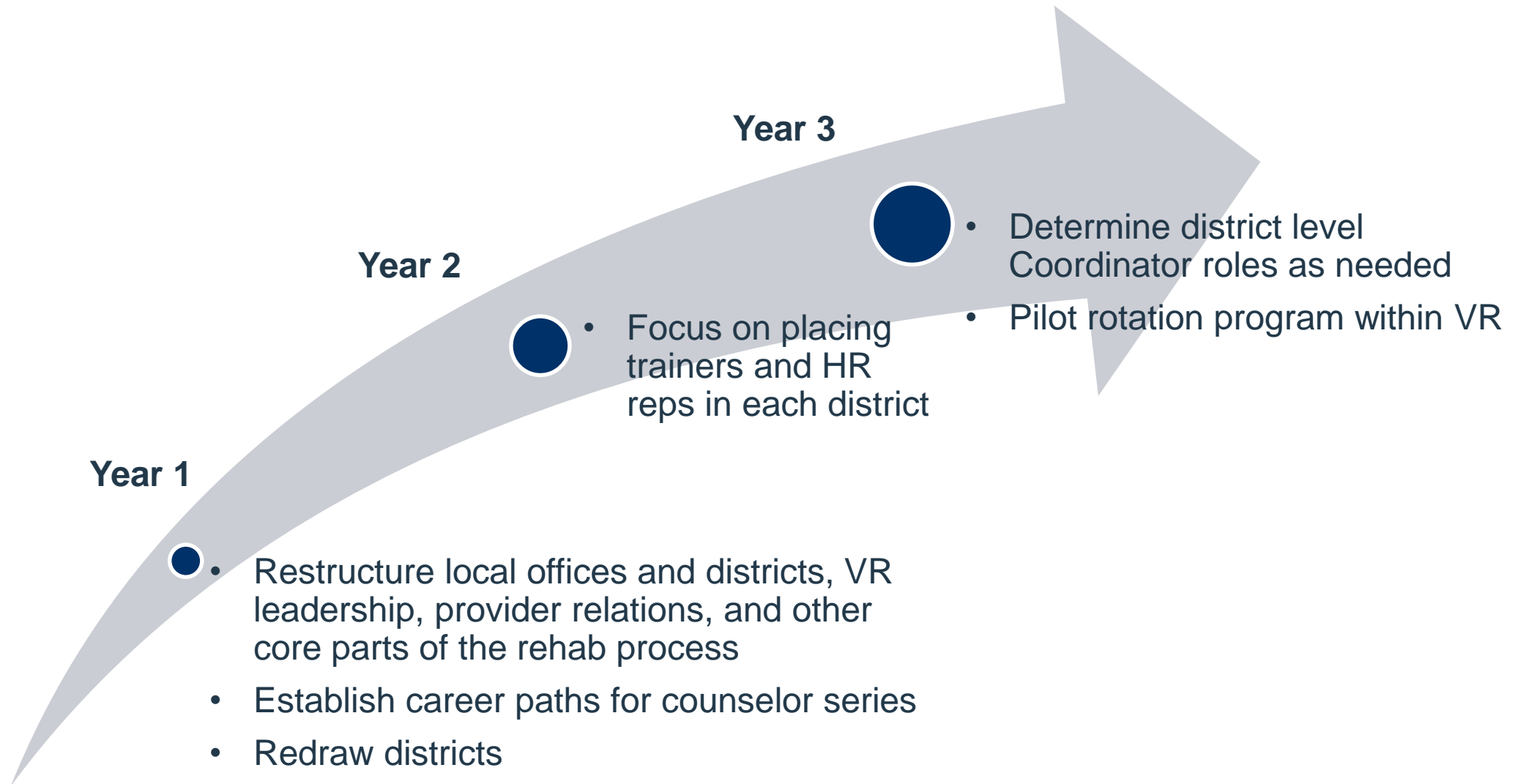
- All staff in the local office report directly to the Supervisor.
- Supervisor does not handle a case load.
- Repurpose Career Specialist Roles to CRC's, CA's, Pre-Employment Specialist and Employment Specialist.
- Employment Specialist (previously Employment Consultants) report to the Supervisor.

# RECOMMENDED CAREER PATH FOR COUNSELORS



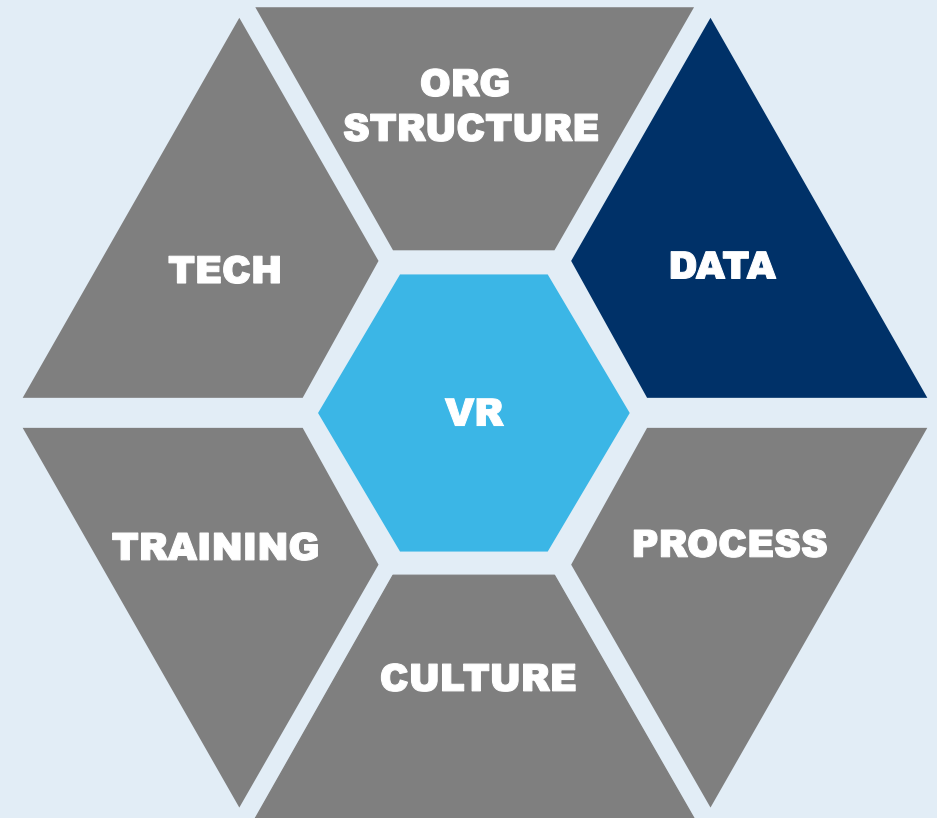
- Counselor Assistant, Pre-Employment Specialist and Employment Specialist progress to the Counselor 1 role (Masters in counseling but not a CRC).
- Counselor 1 - (Masters in counseling but not a CRC).
- Counselor 2 (CRC) – Core Counselor with no other duties but to manage cases.
- Counselor 3 (CRC) – Mentor/Trainer for Counselor 1's and signs off on Counselor 1 cases.
- Supervisor – CRC's but do not handle case load. Supervises the local office staff and the end to end VR process for the cases in that office.

# WHAT VR CAN LOOK LIKE IN 3 YEARS



# DATA

OVER THE PAST 5 YEARS, VR HAS SAVED THE STATE ROUGHLY \$35 MILLION IN PUBLIC ASSISTANCE FUNDS, WHICH STRONGLY SUGGESTS THAT A HEALTHY ORGANIZATION COULD SAVE THE STATE EVEN MORE.





# DATA-DRIVEN DECISION MAKING

Good timely data can and should influence agency decisions, office functions, and, ultimately, great client service.

## Why?

- We wanted to use data to answer the following:
  - Who are VR's clients?
  - Where are VR's clients?
  - Are VR offices where they can meet the demand of disability populations across the State?

## How?

- The data was culminated into a series of interactive dashboards using Accenture's Insights Platform in conjunction with VR's case data.
- During that process, we also had other data findings that we felt should be brought to VR leadership's attention and some of them are outlined in this report.

# DATA-DRIVEN DECISION MAKING

Data from Accenture's Insights Platform was used in tandem with VR case and budget data to create a data driven view of VR performance.

## What data was ingested?

- From Accenture's Insights Platform we examined demographic information at the county, zip, and census tract level on a number of factors including but not limited to:
  - Disability prevalence
  - Disability employment ratio
  - Disability unemployment rates
  - Disability type
  - Veteran status
  - Age
  - Educational attainment
  - Poverty level
  - Working age populations
  - Etc.
- From VR's case data from the past 5 State fiscal years we examined:
  - Case outcomes
  - Employment outcomes
  - Reservice rates
  - Historical trends in agency performance
  - Process efficiencies
  - Changes in public assistance reliance
- Budget data provided a view of the cost of case services, administrative, and travel at the office level, which included the following and excluded any cost related to human services (salary, pensions, benefits, etc.):
 

<p>Administratively:</p> <ul style="list-style-type: none"> <li>• Rent, electricity, water, and sewage costs per office</li> <li>• Janitorial services, shredding services, and office supplies costs per office</li> <li>• Local taxes, fees, and memberships</li> <li>• Etc.</li> </ul>	<p>Travel:</p> <ul style="list-style-type: none"> <li>• Hotel costs</li> <li>• Car rentals</li> <li>• Parking reimbursements</li> </ul>
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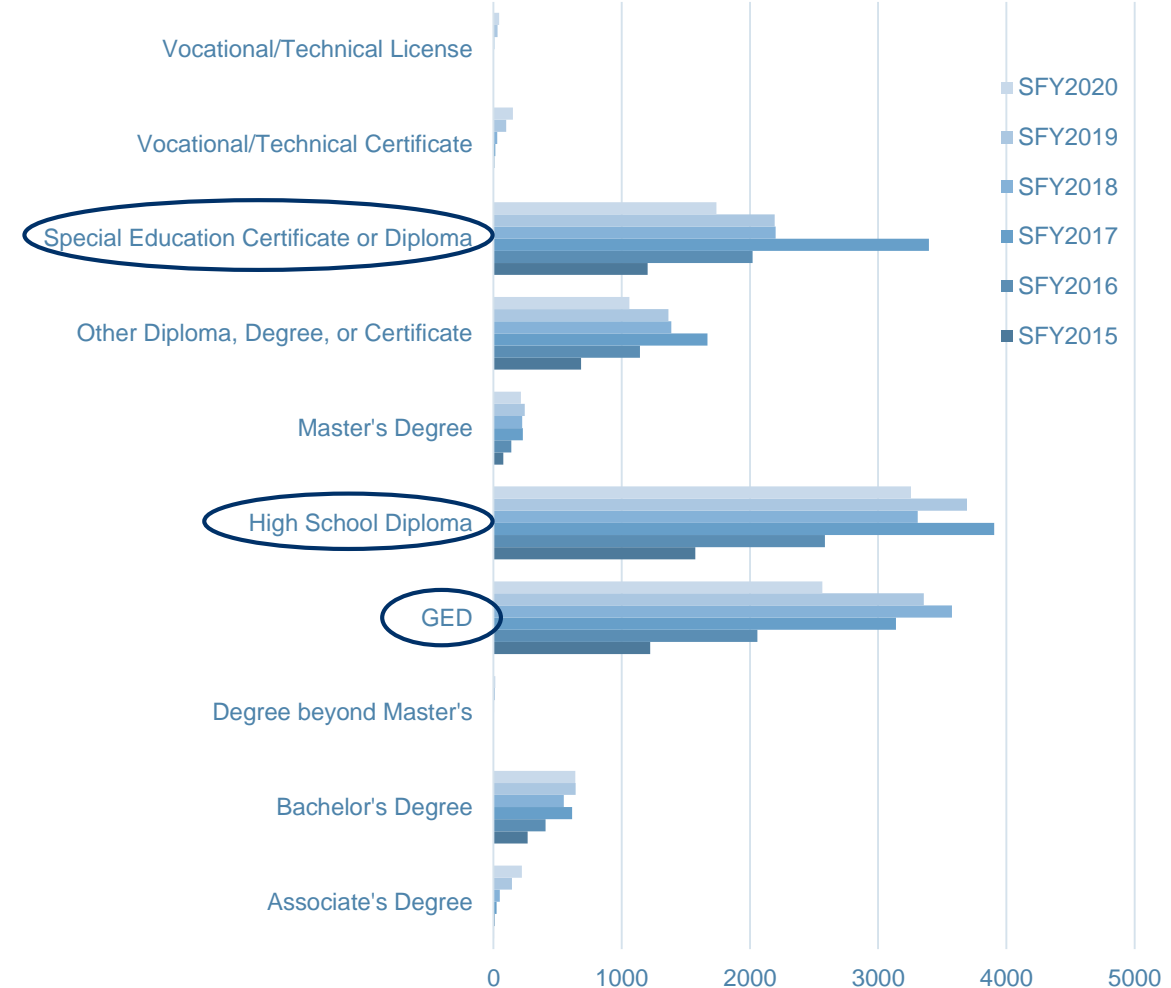
# WHO ARE VR'S CLIENTS?

Case management data provided a view of the average client that walks through a VR office door.

By using VR's own data from their case management system, we were able to glean insights into who a typical VR client may be. This is not to say any two VR clients are alike, but to examine who the agency typically serves and to examine if that affects service delivery.

- Most of VR's clients have cognitive or psychosocial disabilities. The top 5 impairments VR clients have are:
  1. Cognitive impairment
  2. Psychosocial impairment
  3. Mobility impairment
  4. Other mental impairment
  5. Hearing loss impairment
- While the average age is 33 years old, the majority of VR's clients are between the ages of 20-34.
- There is a slight increase in the number of clients between the ages of 50-64. This suggests that VR is failing to reach a large portion of the working age population, specifically between the ages 35-50.
- 76% of clients have a GED, a high school diploma, or a special education certificate or diploma when they come to VR.

Aggregated counts of education level across all offices by SFY



# WHERE ARE VR'S CLIENTS?

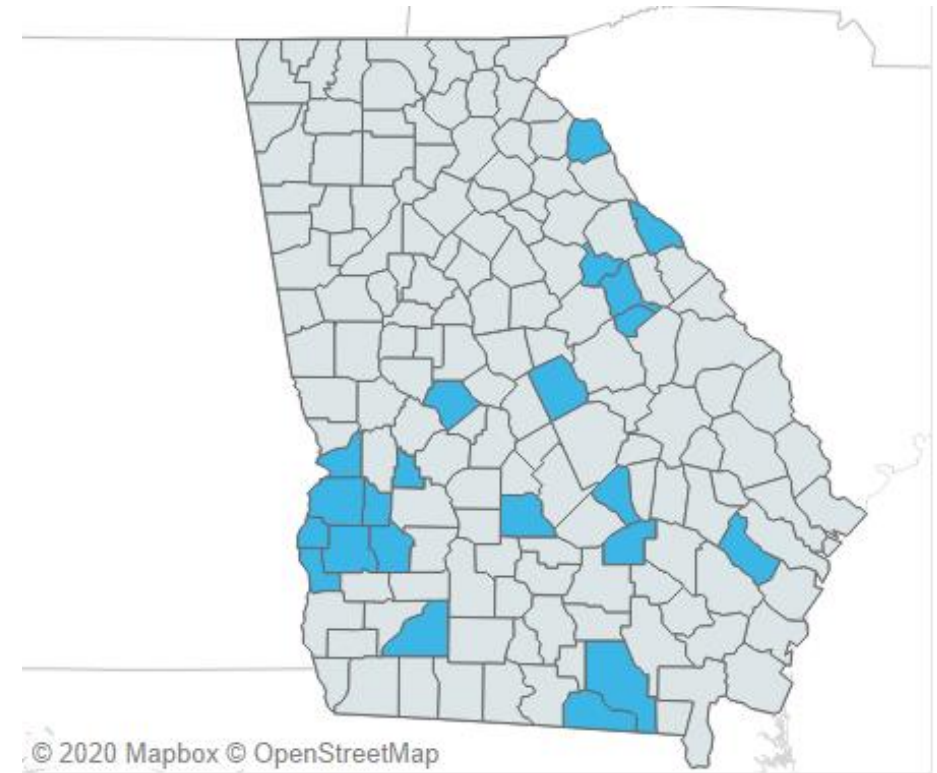
VR clients are spread out across the State, and data showed 22 counties that currently underserved due to service gaps.

VR's clients are currently most densely populated in the Metro Atlanta area – specifically Fulton, DeKalb, Gwinnett, and Cobb counties.

- Outside of Metro Atlanta, there is a larger disability population prevalence around large population centers such as Macon, Augusta, Columbus, etc.
- This makes sense with an increase in total population, one would expect to see an increase in disability prevalence as well

Conversely, we asked “where are clients not being met?”:

- There are currently gaps in service for VR clients. There **are 22 counties with no job ready or employed clients**. This means that while VR may have clients from those counties, those clients have not moved into any sort of job readiness phase or employment.\*
- It is worth noting that this does not account for VR's clients that are in a service called support employment, because the case management system, Aware, does not categorize clients with support employment in job ready or employment statuses.
- Many of those same counties do have a significant working age disability population indicating that there are Georgians that could benefit from VR services but are not being adequately reached.



*Counties shown have no job ready or employed clients  
Note: this does not account for VR's clients in supported employment*

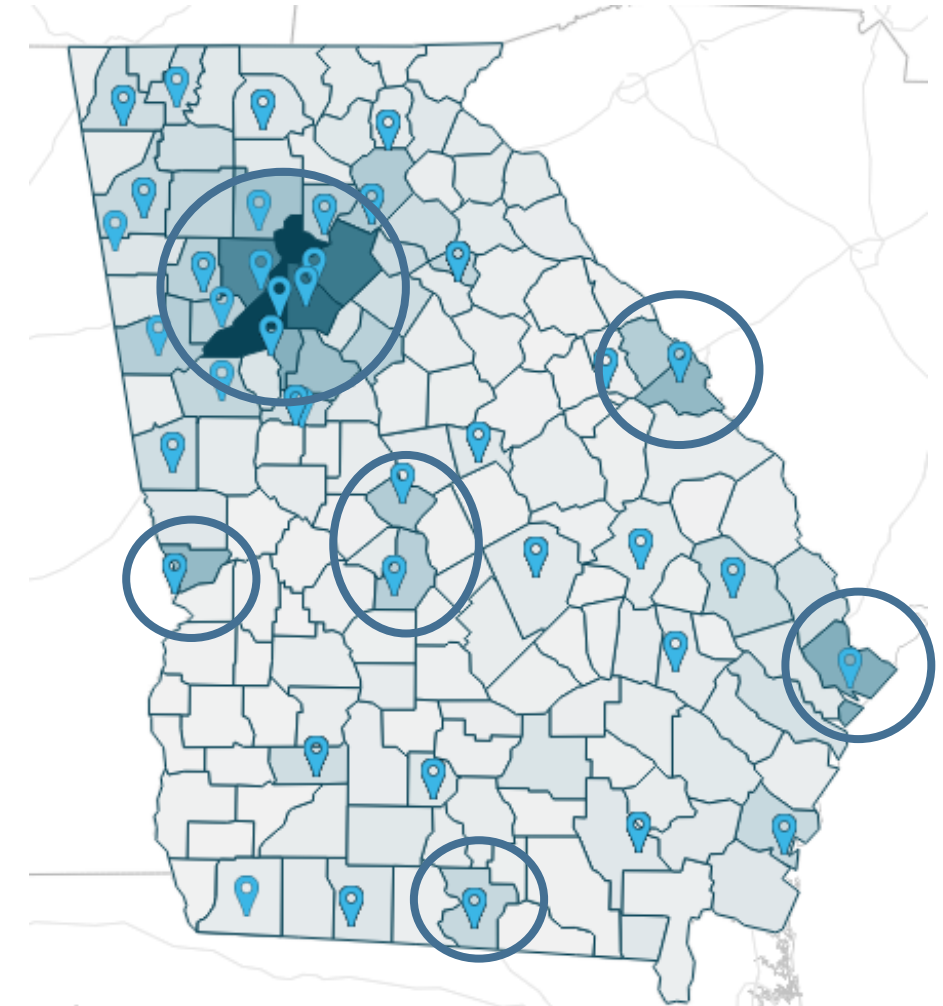
# ARE VR OFFICES WHERE THEY CAN MEET THE DEMAND OF THE DISABILITY POPULATIONS ACROSS THE STATE?

VR currently has a sufficient number of offices to reach all parts of the State. However, not all offices are reaching every county across the State.

- As we looked at population trends for 2030, population centers such as Atlanta, Augusta, Columbus, etc. grow denser.
- This indicates that while VR may not need new offices in areas that don't currently have a strong disability population, they may want to **optimize current office locations and functions to best serve increasing density around population centers.**

## Where will VR clients most likely be in the future?

- Looking at trends out to the year 2030, disability prevalence will remain concentrated in the same areas but increase in population density.
- There are changes in the types of disability that become more prevalent. While there is a slight increase in disability prevalence overall, the data shows that hearing, cognitive, and vision clients become the top three disabilities across the State. This is especially true in Metro Atlanta.
- The future disability prevalence in hearing, cognitive, and vision clients is different than VR's current clientele made up of cognitive, psychosocial, and other mental impairments.
- Note: State of Georgia does have a large disability population for vision and hearing; however, their current clientele does not reflect that.



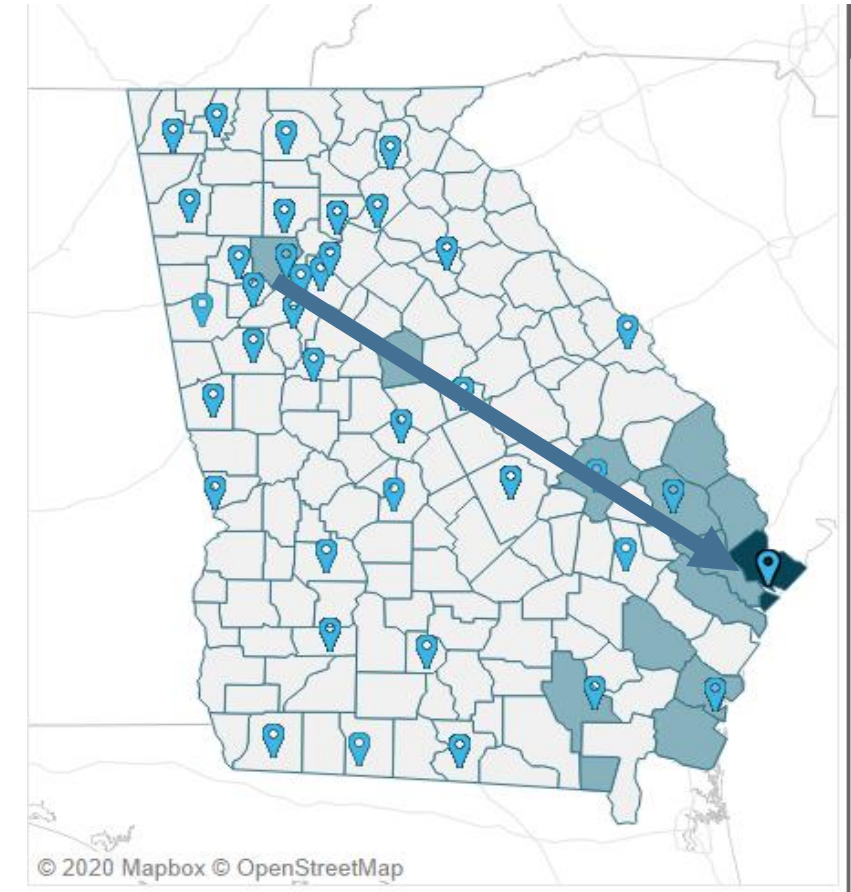
*Heat map of disability prevalence across the State in 2030*



# ADDITIONAL DATA FINDING – OUT OF SERVICE AREA

All but one field office serve out-of-service-area clients.

- **39 out of 40 field offices serve clients from out of their geographic service area.** Often from abnormal distances. The example in the map pictured shows clients from Jasper and even Cobb county traveling all the way to the Savannah VR office for service.
- This means that offices may be doing excessive work for clients that aren't in their service area, or that clients are going out of their way to receive services because their local office isn't meeting their needs.
- This issue may also suggest a reporting issue or classification with how information is entered into the case management system, Aware.
- This issue may also suggest that clients are “vendor shopping” for VR services but it could also be a result of poor intake process when clients come to VR.
- This issue strongly suggests a need for better intake processes and an awareness of service area by an office.
- VR staff should not turn away clients but they should ask why they have come to this specific office and properly document it and finally encourage clients to go to their local VR office if possible.



Relationship of Office to Counties

- Clients in Geographic Service Area
- Clients Out of Geographic Service Area
- No Clients, Out of Geographic Service Area

*A map showing the relationship between client origin and service office. The selected office, Savannah, is an example.*

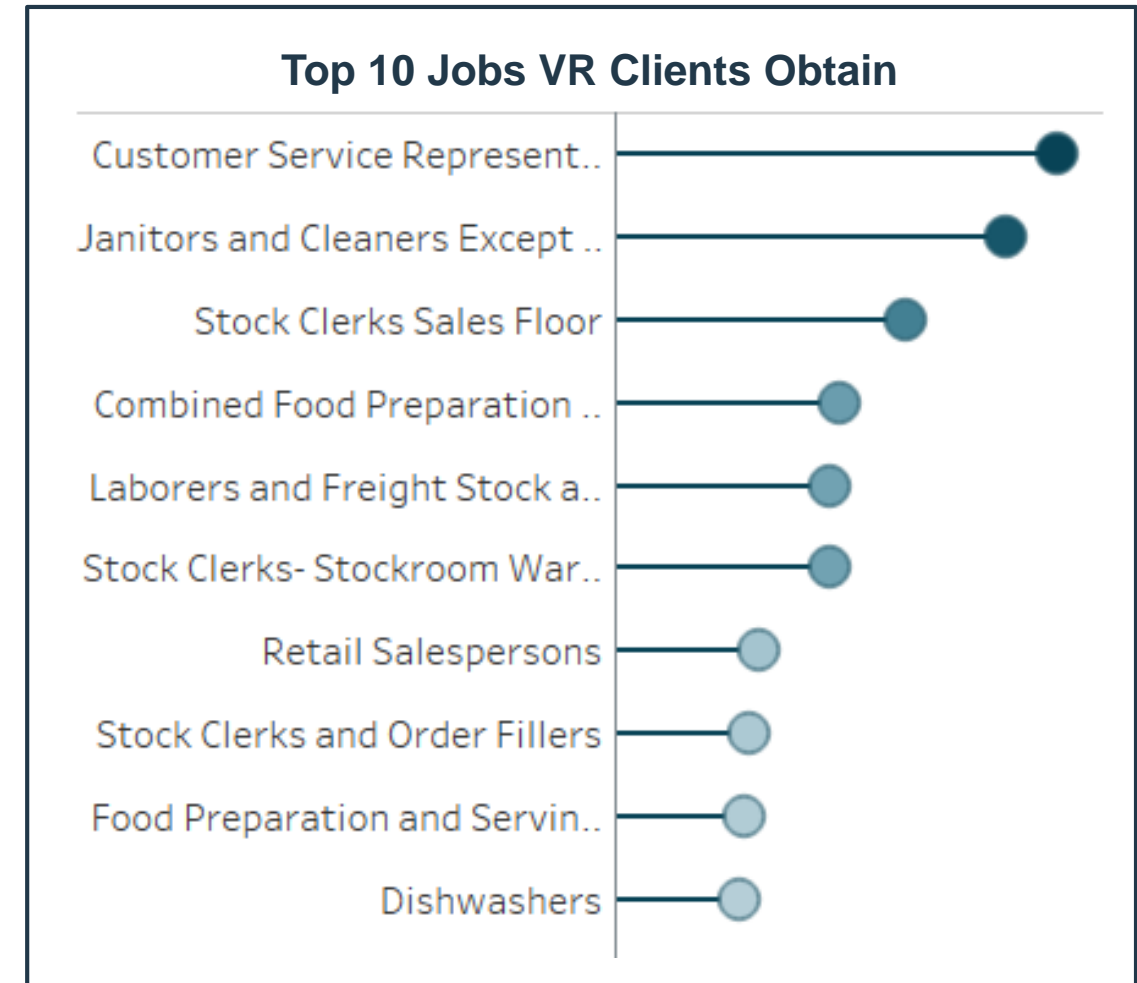


# ADDITIONAL DATA FINDING- RESERVICE

## What does VR reservice look like?

**Most clients come back to VR for reservice, but data limitations make it difficult to track who and how often.**

- Reservice means a client returns back to VR for service/employment.
- Of the 1,793 clients VR successfully found employment in SFY19 they *also* had 1,369 clients that were reserviced.
- While we could not track cohorts of clients due to limitations with the case management system, Aware, to see who was coming back for reservice of the successful case closures VR should think of it this way:
  - Assuming all 1,793 successful closures in SFY19 have never been reserviced clients, **VR should expect 78% (1,369) of those 1,793 newly employed clients to come back to VR for reservice.**
- This trend is likely caused by the nature of the quality of jobs clients obtain. The top jobs VR clients obtain are unlikely to be lifelong careers and many are seasonal in nature.



# ADDITIONAL DATA FINDING – VR SERVICES SAVE MONEY <sup>DRAFT</sup>

When VR works, it really works for the State.

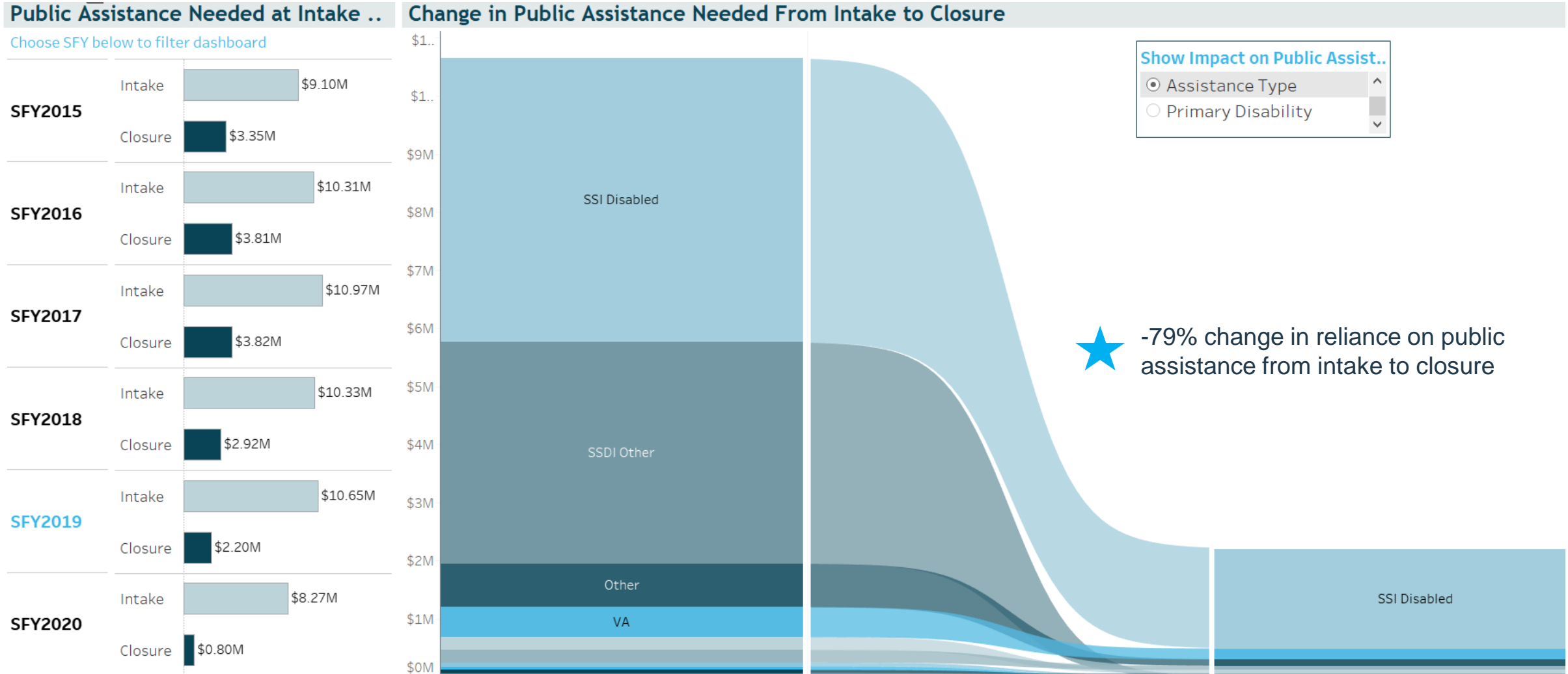
## VR's positive impact on reliance on public assistance funds is extremely significant\*:

- Over the past 5 years, collectively, VR has saved the State roughly \$35 million in public assistance funds, which strongly suggests that a healthy organization could save the State even more.
- In SFY19, VR clients collectively cost the State \$10.6 million at the beginning of the VR process and \$2.2 million at the end of their VR process.
- **VR has closed 43% fewer clients in 2019 than they did in 2017. Despite this decrease in productivity, the savings to the State have remained steady. On average, VR's work annually saves the State ~7.5 million in public assistance funds.**
- The largest age group that makes up the change in public assistance funding are ages 44-64 with an -84% change from client intake to client closure. Simply stated, this means that VR is helping Georgians with disabilities who want to work or want to continue to work to do so.
- Equally important, ages 18-24 barely lag: a -74% change, indicating that VR is reaching a younger generation to encourage them to work and live independent and able lives.

*\*Note: A chart depicting the impact on public assistance funds can be found on the next page.*

# ADDITIONAL DATA FINDING - VR SERVICES SAVE MONEY

VR's positive impact on reliance on public assistance funds.



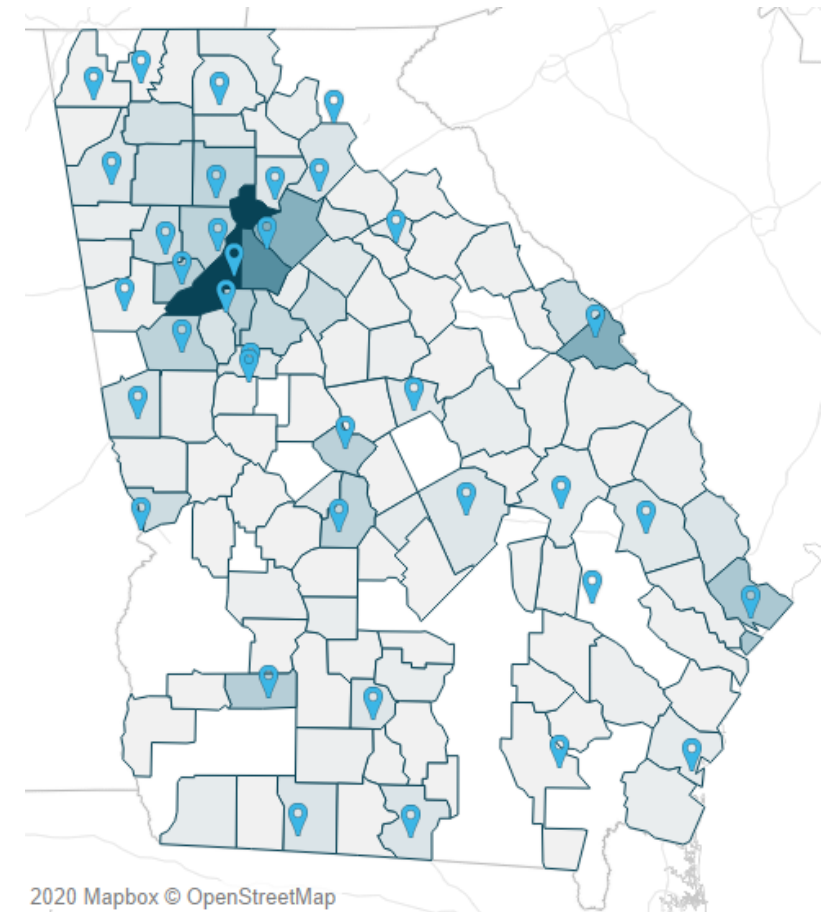
A Sankey chart showing the decrease in clients' public assistance needed at intake vs. closure.  
 Note: this does not account for attrition due to limitations in the case management system Aware.

# ADDITIONAL DATA FINDING – DATA LIMITATIONS

Several factors affected the scope and efficiency of collecting and analyzing VR data.

**Many of the same issues VR staff frequently face proved to be limitations for our assessment as well:**

- Business Applications was a unit in GVRA's administration, not VR itself, that was responsible for creating reports. However, the territorialism we discovered in the GVRA administrative assessment became an issue in this particular project. We were only allowed to work with one person within the department which led to delays in receiving data.
- During our assessment, the Business Applications unit was being dissolved and those positions were moving into IT.
- There were issues in data entry from the offices into the case management system, Aware, resulting in large gaps in information and numbers didn't add up – especially when we requested reports from different departments outside of Business Applications.
- There are severe limitations in Aware on the type and amount of information captured during the VR process which makes it difficult to capture true agency wide information. Staff also used inconsistent statuses in Aware to indicate where a client was in the rehab process.
- Finally, while budget information was captured and reported, the manner in which budgetary information is reported makes it extremely difficult to drill down and analyze in an organized way. This challenge was also encountered with data from local offices, due to data entry.



*Information gap: missing counties indicate there is no data in Aware from those areas*

# RECOMMENDATIONS ON USING DATA TO MAKE INFORMED VR DECISIONS

## Recommendations based on what the data showed:

- **Assess** current resource allocation based on current and future state demand using data to ensure that VR is meeting the client where the client is.
- **Assess** specialty disability needs in population centers based on population data and ensure VR field offices are appropriately staffed to address local needs.
- **Ensure** current offices are reaching all 159 counties in Georgia and will continue to reach all 159 counties in the State.
- **Encourage** VR staff to serve local clients so that clients do not need to travel across the State for service.

## Recommendations based on what the data was limited by:

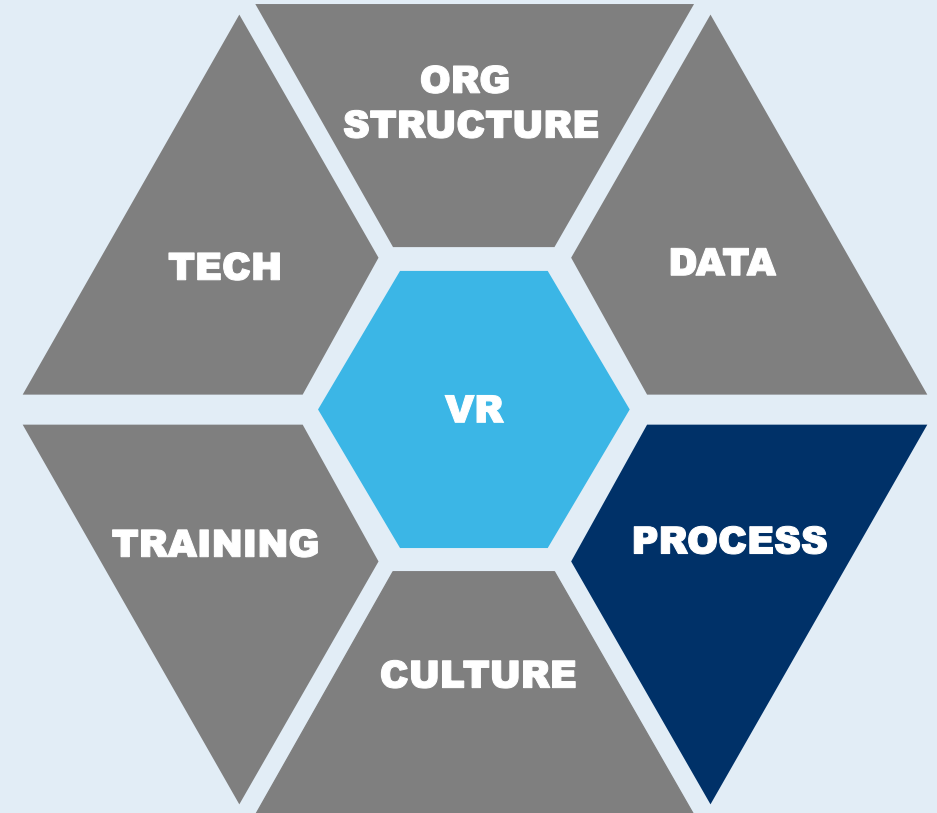
- **Ensure** staff standards of data input, using Aware consistently and accurately
- **Empower** local office managers to conduct quality checks on staff inputs, outputs, and other reports necessary to supervise teams.
- **Enhance** Aware's case management capabilities based on metrics that enable VR to manage the business to defined performance measures.
- **Encourage** VR to compare itself to peer states and to leverage successful states as models.
- **Create** a systematic way to quality control data inputs and outputs in order to create standardized reporting metrics.

## Recommendations for future data analysis:

- **Track** cohorts of clients in order to observe client reservice (with enhanced Aware capabilities).
- **Monitor** population trends over time and compare them to population served.
- **Map** employment goals with client outcomes to measure the most common types of services VR clients are obtaining and how successful VR was in helping a client reach their employment goal (with enhanced Aware capabilities).
- **Utilize** Accenture's Insights Platform to model outcomes with predictive analytics.

# PROCESS

63% OF STAFF POLLED STATE THAT VR IS PERFORMING BELOW AVERAGE TO FAILING IN FULFILLING ITS MISSION.

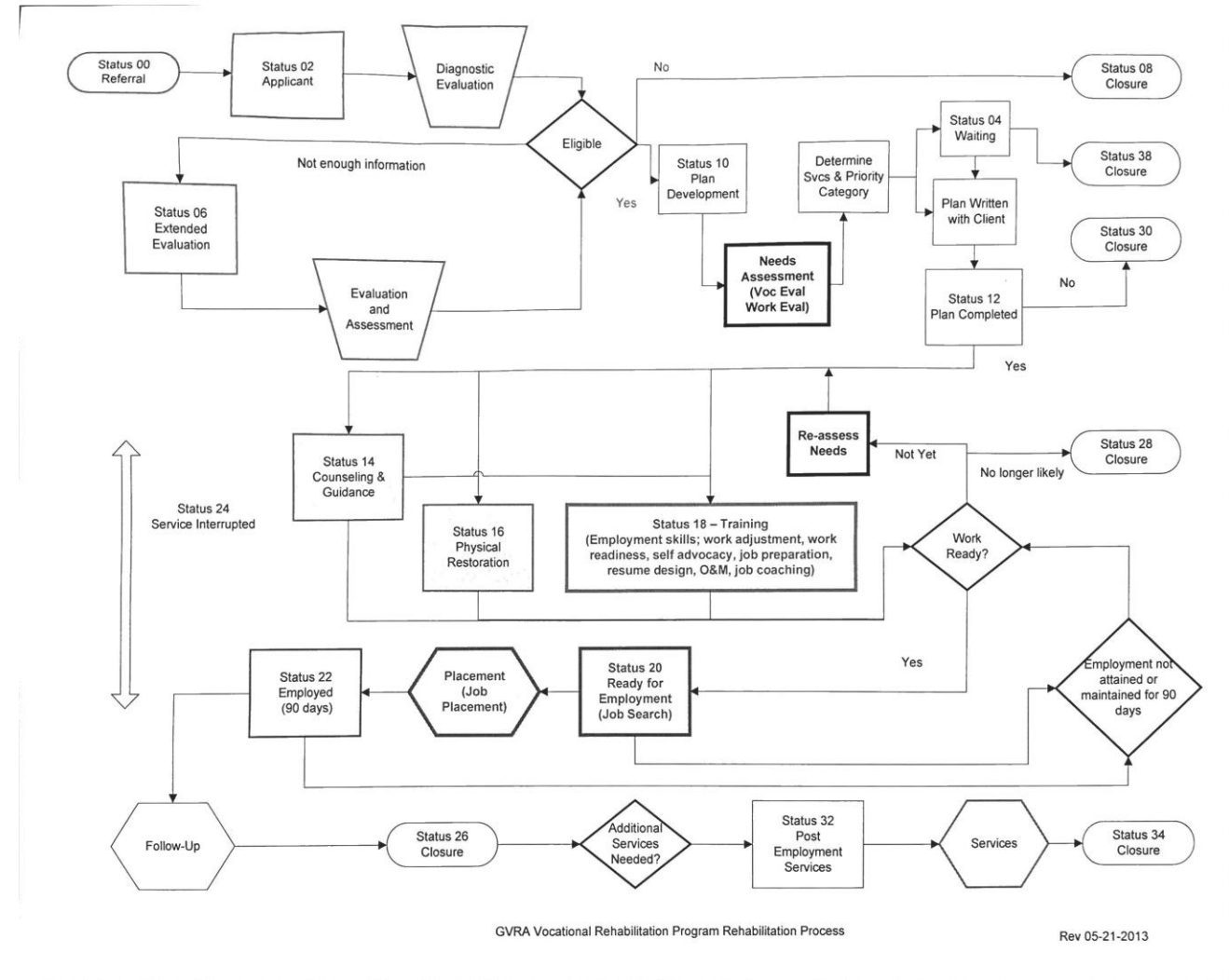




# VR'S CURRENT REHABILITATION PROCESS

Core service delivery steps associated with the VR client rehabilitation process were documented and evaluated for efficiency, effectiveness, and clarity.

- We reviewed end-to-end steps within VR's rehabilitation process. Across the State, field office staff developed consensus around key steps and related challenges and opportunities.
- Documentation and analyses were used to confirm our understanding of current steps and pinpoint specific areas where improvement was possible.
- Process analysis included documentation reviews, interview transcription, and coding of 497 responses from staff feedback.



\*Source: Current-State VR Process Map provided by GVRA (2019)

# VR SERVICE DELIVERY: WHAT WE LEARNED

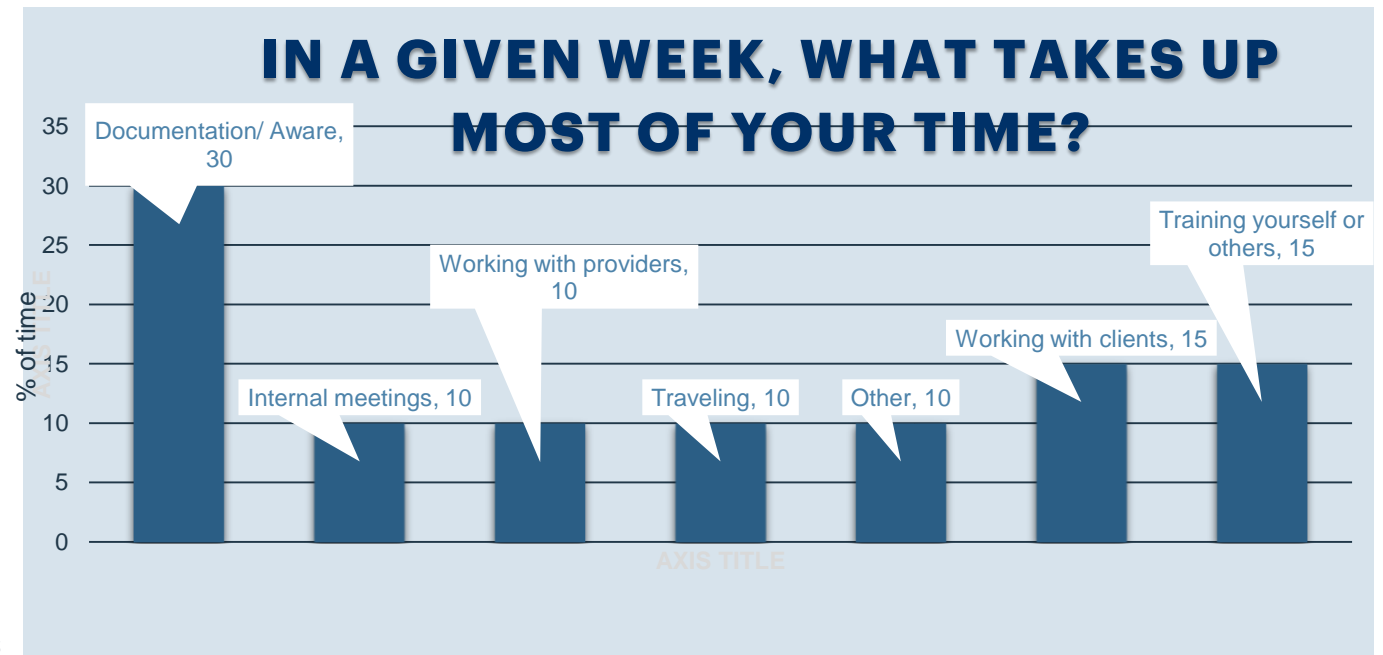
Most service delivery issues revolve around leadership, staffing, accountability, and knowledge deficits.

## Process Standardization, Staff Autonomy & Training Issues

- Policies, procedures, and protocols that govern the rehab process do exist in some form within the agency but are neither easily ingested by staff nor consistently enforced or implemented in the same way across all VR offices.
- Standard and consistent staff training on the VR rehab process and policies guidelines does not exist.
- There are too many approvals necessary for various steps in the rehab process, negatively impacting the speed and timeliness of service delivery.

## Technology Limitations

- In its current state, VR's primary record management system "Aware" does not efficiently drive the rehab process. Aware phrasing is not compatible with agency nomenclature, and the tool does not support the needs of visually impaired staff. **VR staff report spending 30% of their time each week just on documentation in VR's Aware case management tool, which is double the amount they report spending with clients.**



# VR SERVICE DELIVERY: WHAT WE LEARNED

**Most service delivery issues revolve around leadership, staffing, accountability, and knowledge deficits.**

## **Misaligned Outcome Objectives**

- VR's socialized program outcomes do not directly relate to mission effectiveness on an annual basis. Currently, VR bases it's annual goals on closure totals from the previous year in order to indicate progress.
- Outputs in the rehab process are currently not evaluated based on timeliness of job placement, service quality, nor job retention.

## **Inadequate Service Provision Governance**

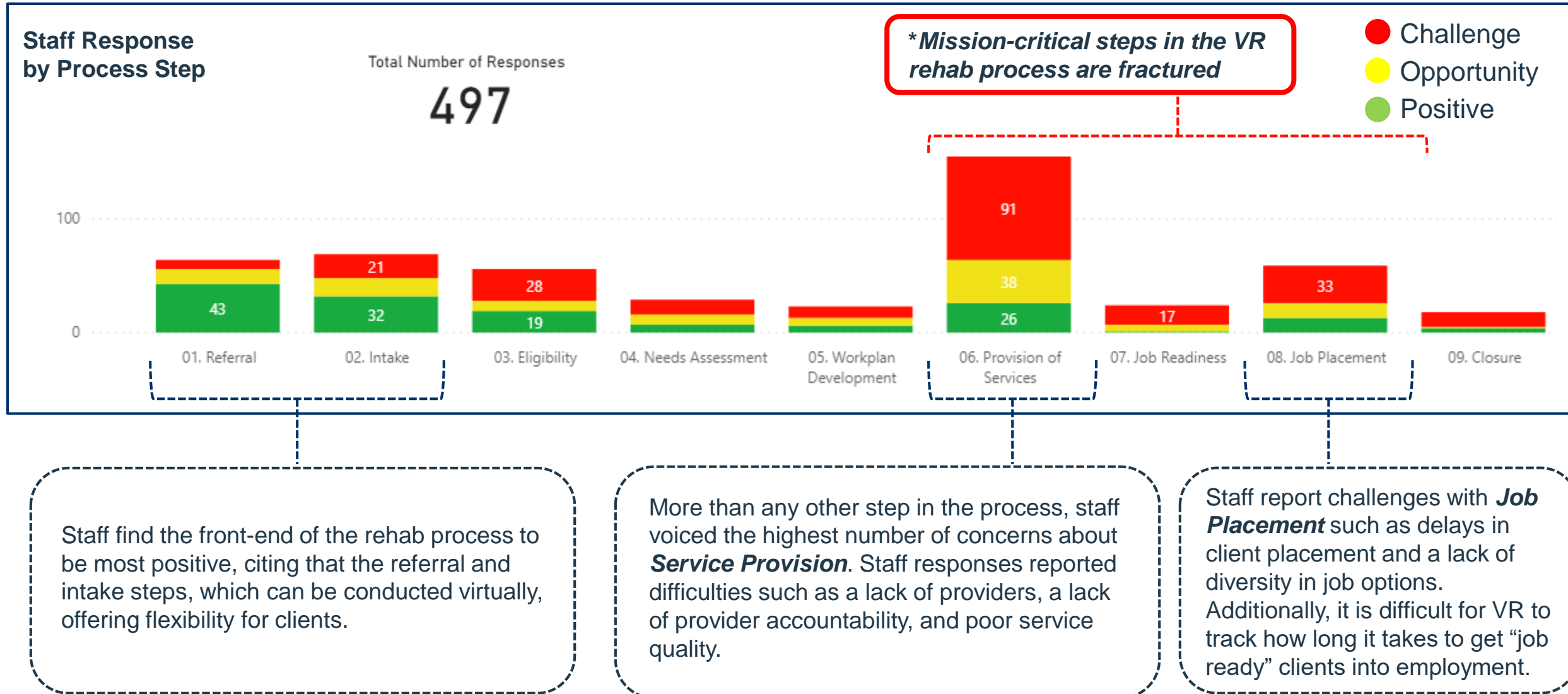
- External vendors and providers are responsible for a majority of the execution of critical client-facing service functions like: Skills Training, Job Readiness, and Placement, yet are not held accountable for meeting specific VR's outcomes, and are not monitored on an ongoing basis.

## **Job Development & Placement Obstacles**

- VR's internal Employment Services division operates in a silo and is not involved in the early stages of the rehab process. Currently, the strategic focus of this unit is employer relationship development, rather than client-based job matching.
- Neither Employment Services nor external Service Providers responsible for client job development are evaluated on timeliness nor appropriateness of job placement.

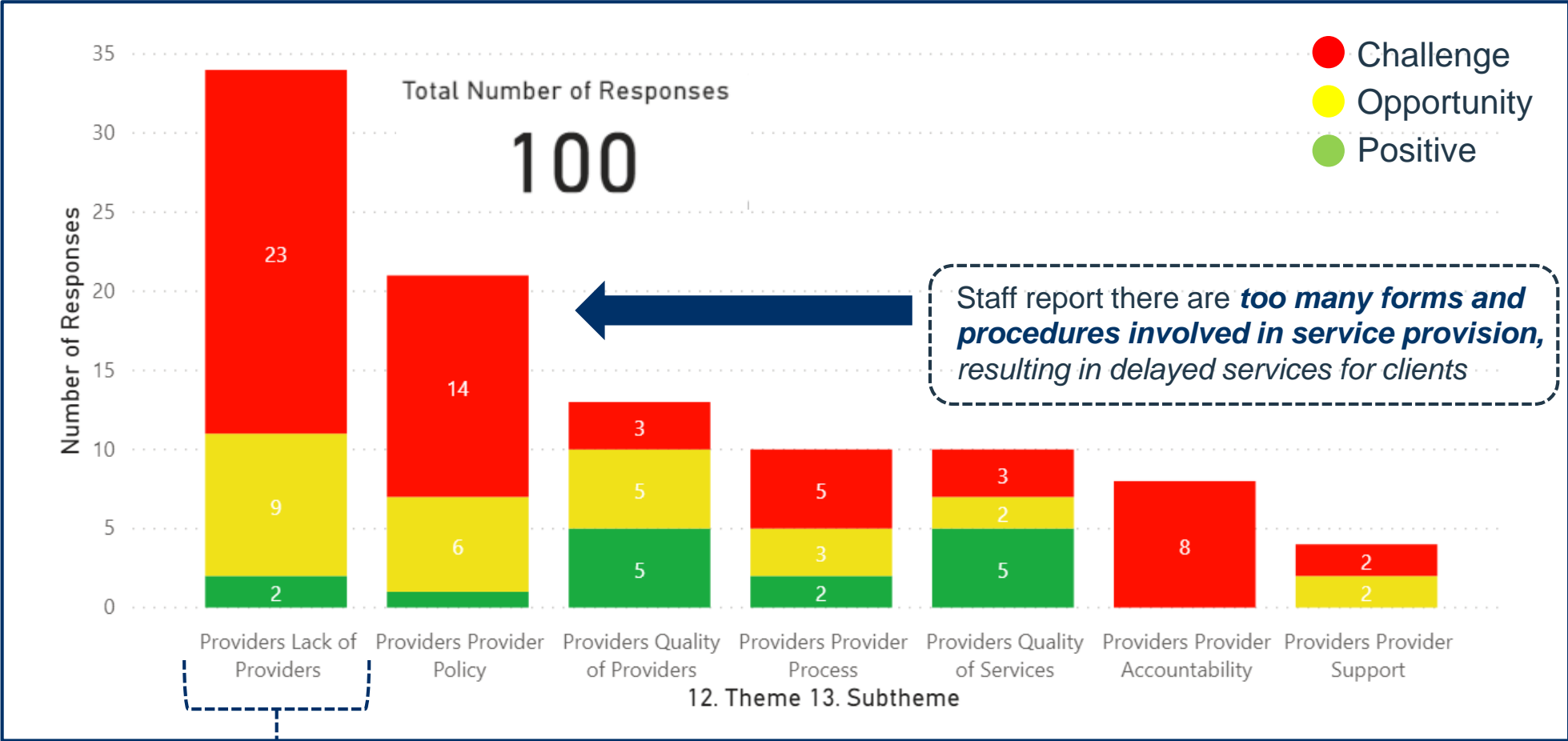
# KEY FINDINGS IN VR SERVICE DELIVERY

Once Service Provision begins, staff report an increase in challenges in VR's rehab process.



# BROKEN SUB-PROCESS: SERVICE PROVISION

What VR staff said about working with Providers.



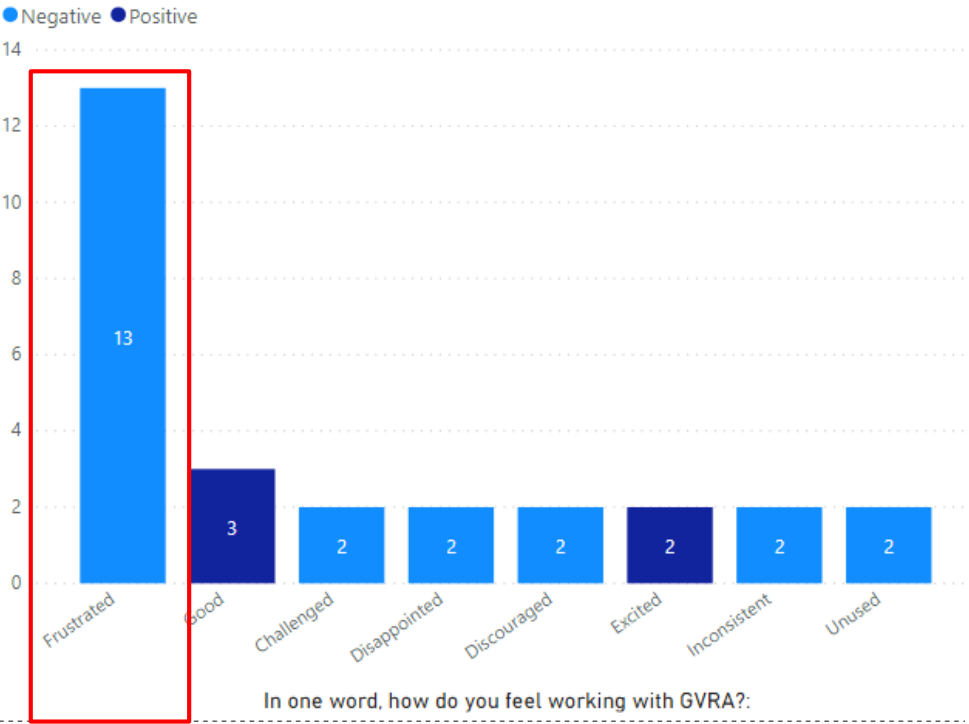
Staff report there are **too many forms and procedures involved in service provision, resulting in delayed services for clients**

The **lack of service providers** across the State is a major area of concern for VR staff

# BROKEN SUB-PROCESS: SERVICE PROVISION

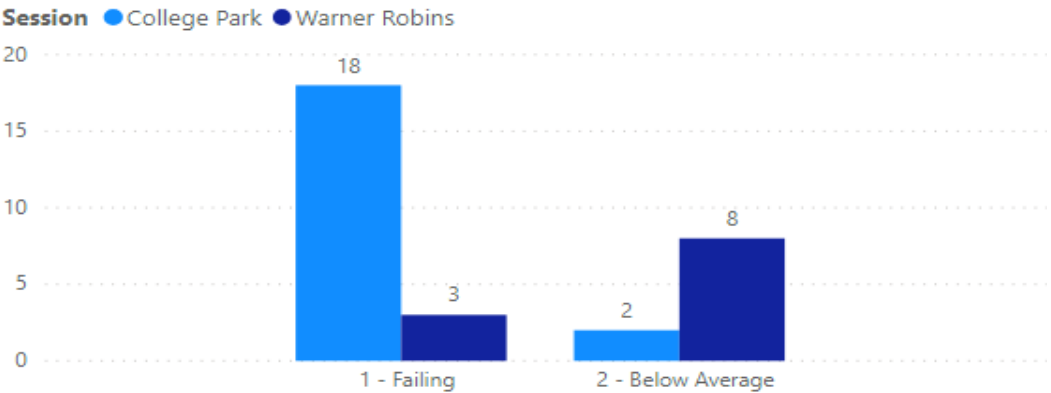
What Providers said about working with VR.

In one word, how do you feel working with GVRA? (Top 8)

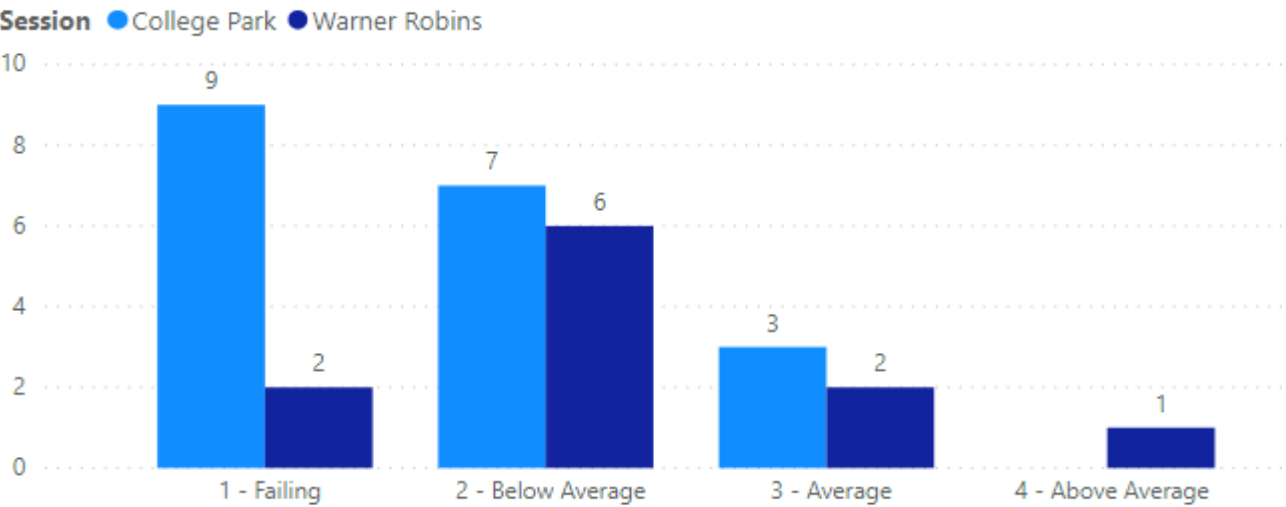


46% of Providers polled expressed that they feel *frustrated* working with VR

How would you rank GVRA's communication with policy changes, client information, etc.

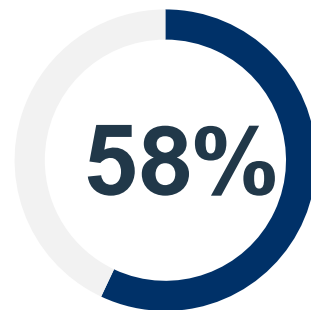
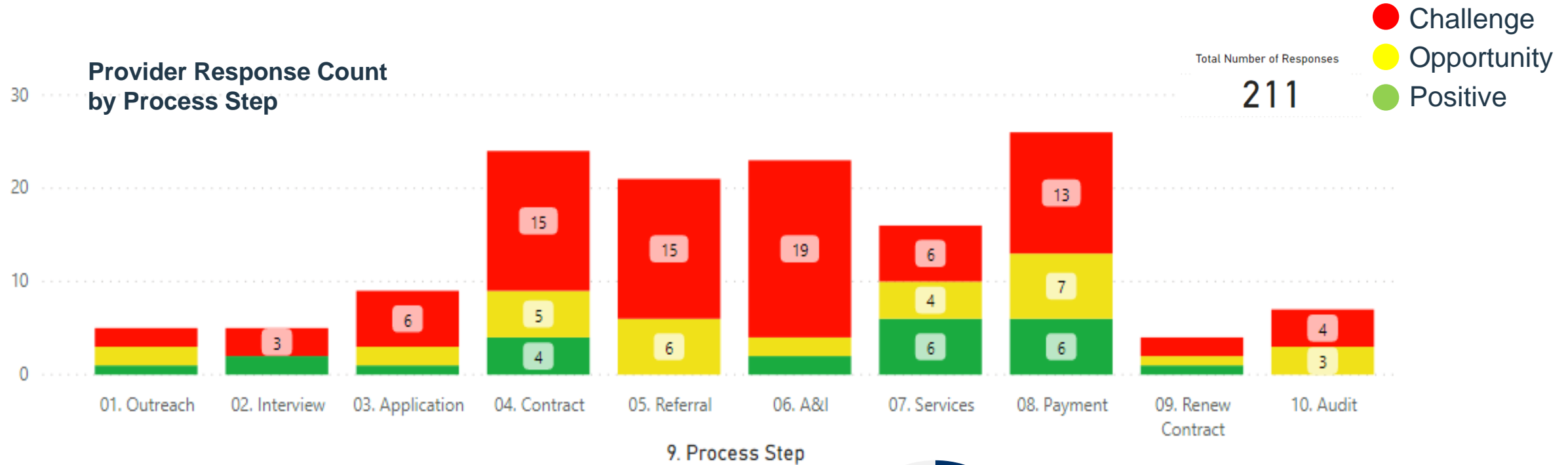


Rate the quality of resources (training, documentation, plans, etc.) provided by GVRA

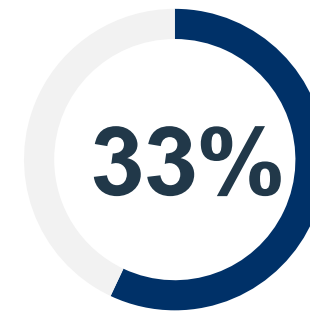


# BROKEN SUB-PROCESS: SERVICE PROVISION

Vendors and Providers report increased challenges at recurring business transactions with VR.



of all responses were challenges



of all responses mentioned delays in VR's contracts, A&Is, and payment processes



# BROKEN SUB-PROCESS: SERVICE PROVISION

While VR staff and providers both agree that provider governance is ineffective, they differ in other key areas.

## Top VR Staff Concerns with Providers

- Provider accountability is lacking. Providers demand client referrals from VR, but are not properly vetted nor consistently monitored for performance outcomes.
- There is a lack of service providers across the State, especially in rural areas, preventing clients from achieving optimal program results.
- The quality of existing providers suffers, likely due to relaxed vendor approval processes and limited oversight.

## Top Provider Concerns with VR

- VR engages inconsistently with providers and vendors. Site visits are not conducted regularly, onboarding interviews for new providers are not constant and forms lack standardization.
- There is a general lack of communication and feedback from VR. Changes affecting providers are not socialized on a regular basis, and there is no single source of truth around matters of Service Provision. Providers receive conflicting information from different VR offices and staff.
- Interactions with VR systems and processes are unnecessarily complex and inefficient. It takes too long to receive documents and payments, and access to the Aware system for invoicing is exclusive to certain providers only.

# BROKEN SUB-PROCESS: SERVICE PROVISION

Recommend VR improve Vendor/Provider relationships through the following:

- **Create** a catalog of all VR providers and make accessible for staff. Include a list of services they are authorized to provide VR, and a rating/comment section that can be edited by counselors and other VR staff that interact with them. Task district provider relations manager with regularly monitoring of provider reviews.
- **Reconstruct** the Vendor/Provider intake process by implementing a standard prerequisite checklist and scorecard prior to application approval and contract execution. Leverage Eligible Training Provider List (ETPL) certification requirement and prioritize the selection of providers who have achieved this distinction.
- **Evaluate** service providers on achieving specific service quality and outcomes that link back to overarching VR strategic goals. Conduct quarterly audits on *all* active VR providers.
- **Develop** a quarterly meeting cadence either virtually or in-person to update Providers on upcoming changes and to address ongoing issues.
- **Repurpose** positions within the Provider Relations department to position to handle district-level provider interactions and contracts.
- **Assess** the option of automating contracts, authorizations and invoices, and payment processes within the Provider Relations department. Investigate similar State agency models with the intention to duplicate and share resources.
- **Administer** a statewide survey with the goal of identifying provider service gaps regionally in order to inform strategic provider recruitment efforts across the State.

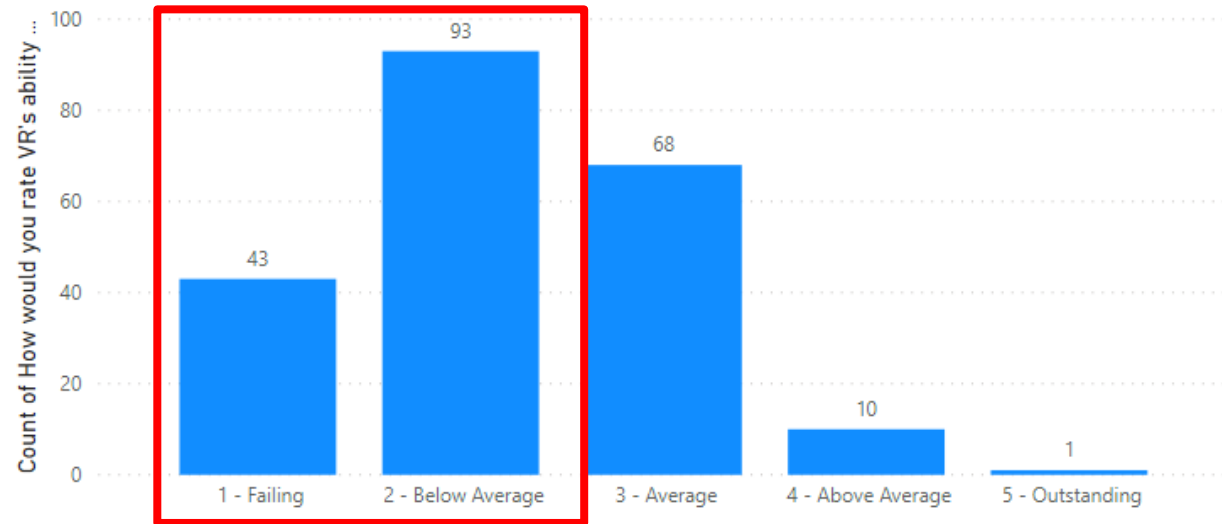
*\*Any efforts to improve VR Provider Relations should focus on stricter oversight and quality control of service provision, reducing internal processing times, establishing clear and consistent lines of communication for providers, and utilizing technology and automation for recurring interactions such as payments and contract renewals.*

# BROKEN SUB-PROCESS: JOB PLACEMENT

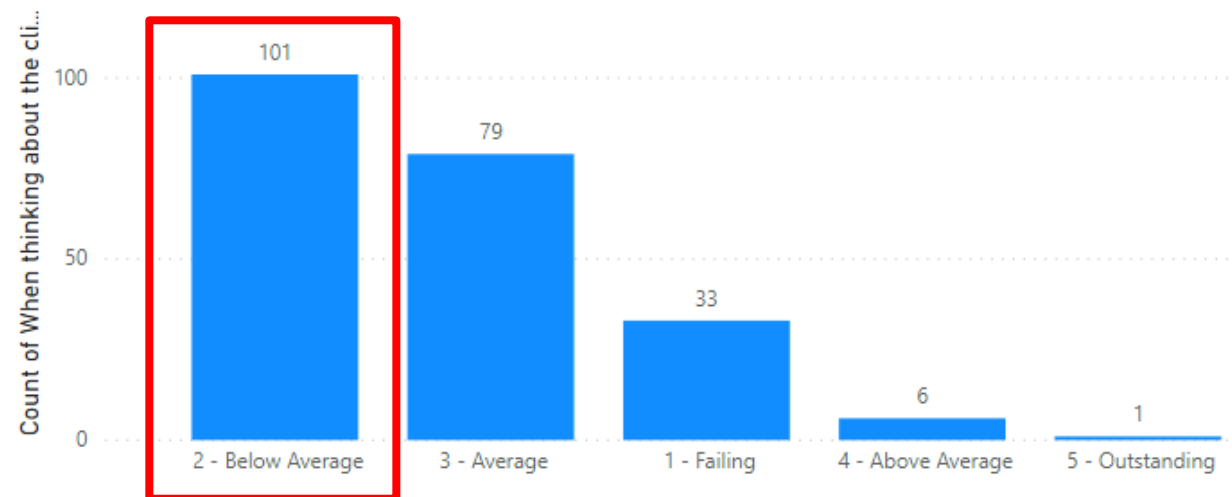
VR staff are aware that, while client success stories do exist, many clients simply are not receiving the services they need and VR should provide.

- 63% of staff polled state that VR is performing ***below average to failing*** in fulfilling its mission.
- 46% of staff polled state that clients have ***below average job opportunities*** based on their qualifications.

How would you rate VR's ability to find and maintain employment for Georgians with disabilities



When thinking about the client, rate the quality of job options for them



# BROKEN SUB-PROCESS: JOB PLACEMENT

With a refocus on client-based job matching, VR can help more clients obtain meaningful employment. Recommend VR consider the following:

- **Re-integrate** key functions of the Employment Services division into the local office reporting structure. Align job functions of Employment Services with those of counseling staff for improved service continuity. Develop and enforce an SOP with the conditions on when to outsource job development and placement services to Providers, and when to use services in-house.
- **Staff** the newly recommended *Pre-Employment Specialist* position in each office. Task this position with conducting Job Readiness services and creating and enforce SOP on when to use this role versus when to outsource job readiness to Providers.
- **Leverage** relationships with local Chambers of Commerce, Mayor's offices, and local Economic Development offices in order to garner support for more diversified employer relationships for VR.

*\*Enhancing the effectiveness of Job Readiness and Placement services will require reintegrating business units, the creation of new and repurposed positions, and the development and enforcement of standard operating procedures and outreach efforts.*

# VR'S CURRENT STATEWIDE PROGRAM GOALS

Currently, there is no way to understand *how* effective VR is in achieving it's mission due to misaligned outcome objectives and tracking low-impact key metrics.

## 2018 - 2019 Statewide Goals



## Monthly Team Goals

40 Offices / 52 Teams Statewide



- VR's annual, successful closure goal is based on the previous year's successful closure amount. A more meaningful metric would be based on the percentage of eligible clients VR serves annually.
- While RSA's *new* indicators focus on job retention beyond successful closure, there is no explicit statewide metric within VR that emphasizes job retention beyond 90 days.

\*Source: Most Recently Illustrated VR Program Goals provided by GVRA (2019)

# REIMAGINING VR'S STATEWIDE PROGRAM GOALS

The effectiveness of VR's core service delivery efforts will rely on the development and socialization of new outcome objectives.

We recommend VR consider the following key metrics when establishing statewide goals:



<b>More Considerations</b>	<p>Capture timeliness of VR process by reviewing data from Employment Specialists, and Service Providers.</p> <ul style="list-style-type: none"> <li>• Socialize the preference of achieving job placement within 90 days of a “Job Ready” status assignment.</li> <li>•</li> </ul>	<p>Establish “total clients served” based on previous year’s total number of plans created (IPEs) in order to set and socialize annual, successful closure goal.</p> <ul style="list-style-type: none"> <li>• Establish goal to achieve 10% successful closures of total clients served within the first year of changes, and an additional 5% each subsequent year for the next 5 years.</li> </ul>	<p>Consider VR’s current reservice rate of 78% in SFY 2019 and establish and socialize goal to reduce that number by 5% each year for the next 5 years.</p>
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# KEY SERVICE DELIVERY RECOMMENDATIONS

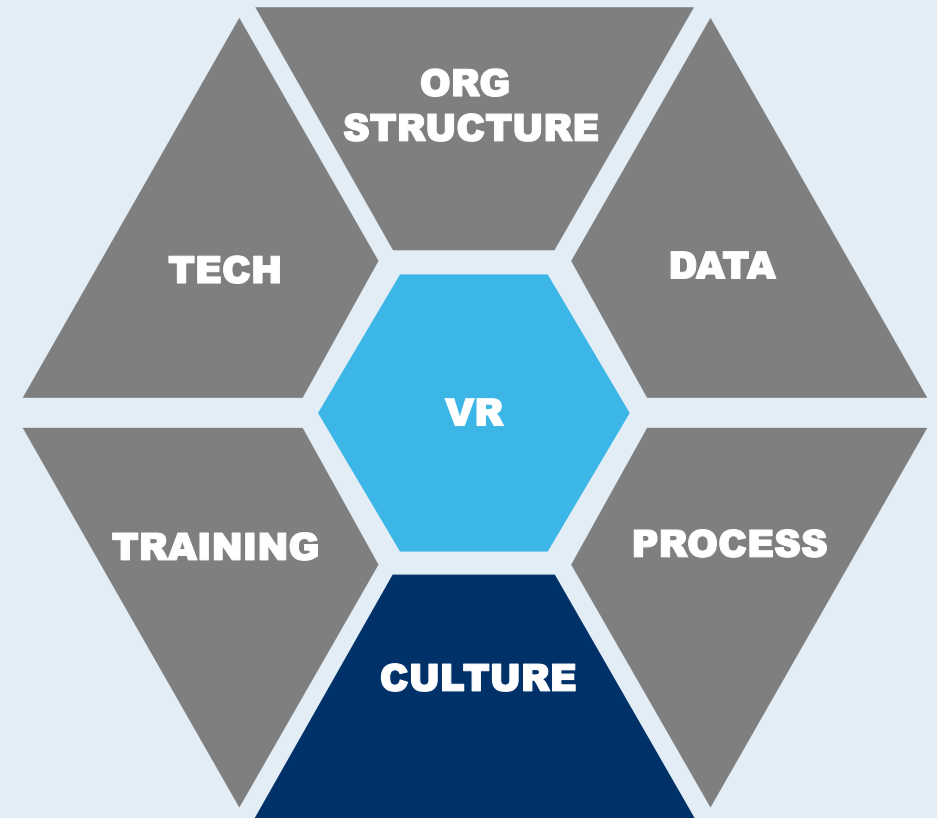
We recommend VR consider the following for process improvement:

Current Issue	Impact	Recommendation
VR policies and procedures, are either not easily ingested by staff, or are not consistently enforced or implemented in the same way across all VR offices.	Client experiences could vary from office to office. The VR process becomes more complicated, inconsistent, and service quality decreases.	Develop simple and visual Standard Operating Procedures (SOP) for each case management step. Task office supervisors to enforce and oversee case quality and compliance.
There is a lack of standard training on the VR rehab process. Staff report executing steps differently based on how they were trained.	Lack of training increases agency risks, reduces productivity, and fosters a culture of staff neglect.	Develop consistent and thorough process trainings and implement statewide. Mandate staff testing on VR policies and the rehab process. Tie compliance to performance reviews.
There are unnecessary approvals required for various steps in the rehab process.	Excessive approvals creates process bottlenecks, leading to reduced speed and timeliness of service delivery and decreased service quality for clients.	Empower counseling staff to make some decisions without approval. Establish clear standards for approval thresholds and limit approvals to direct line of report.
The Aware CRM system does not currently align with VR policy, nor agency nomenclature. Additionally, staff spend more time documenting in Aware than helping clients.	Technology limitations reduces staff productivity and contributes to data quality issues and documentation errors.	Once SOP is defined, ensure Aware aligns and matches agency nomenclature and VR policy. Streamline documentation processes for efficiency.



# CULTURE

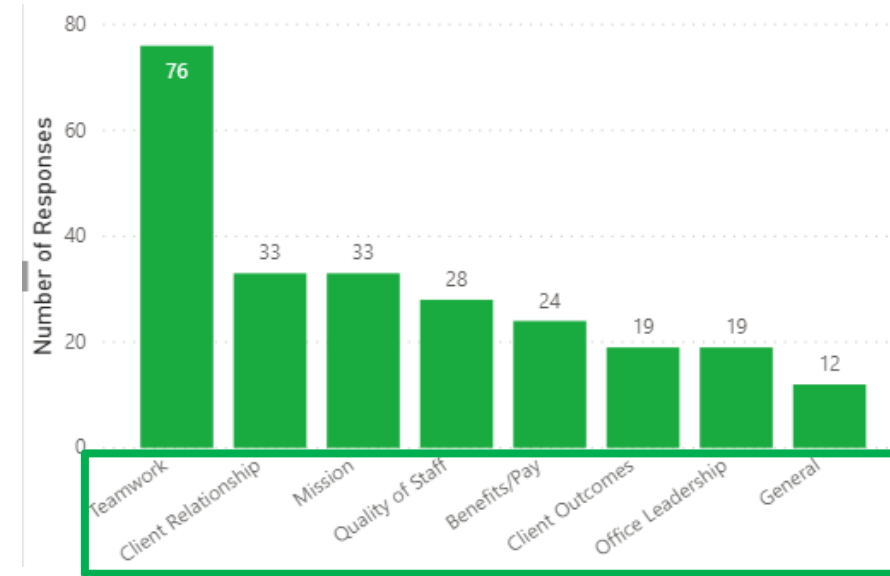
DURING WORKSHOPS, VR STAFF WANTED TO SPEAK ON THEIR ISSUES, COMPLAINTS, OR PROBLEMS WITH THE VR PROCESS AND, MORE SPECIFICALLY, HOW IT AFFECTED THEM, NOT THE CLIENT.



# VR STAFF: WHY THEY CHOOSE TO WORK AT GVRA

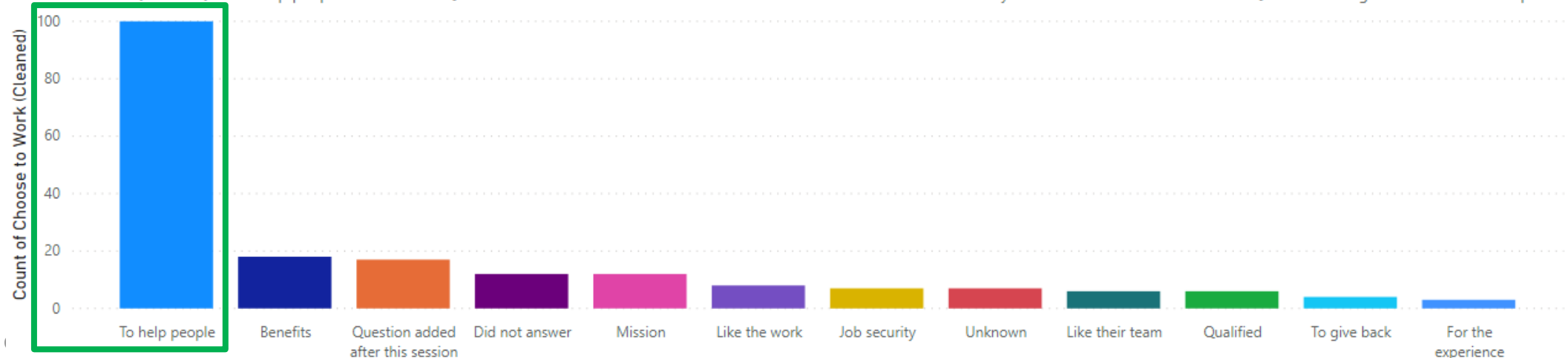
VR staff work at VR because of their team, their clients, and the agency mission.

- Participants in all offices cited their immediate teammates as a benefit/positive to their job.
- Other positives included developing client relationships, believing in the mission, and flexible work schedules.



Why do you choose to work at GVRA?

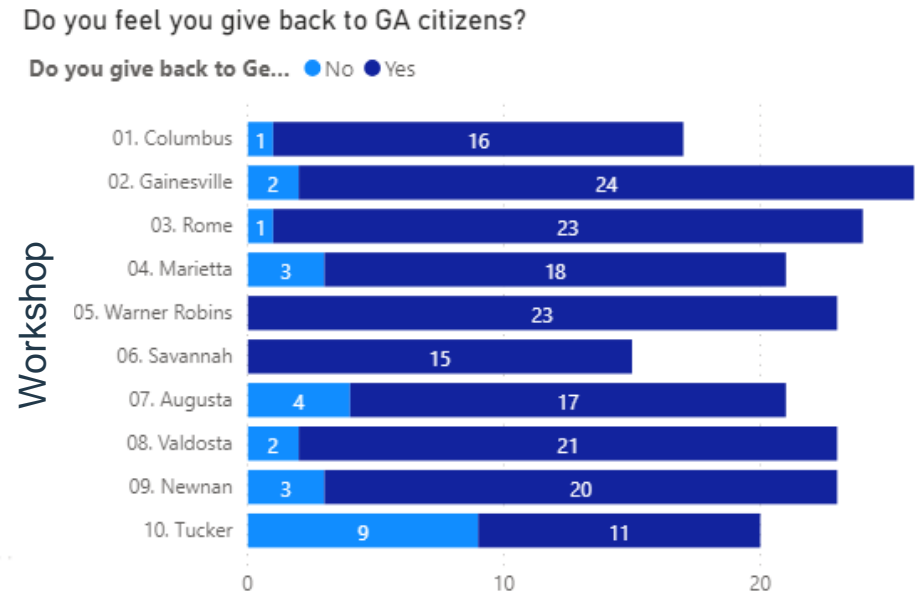
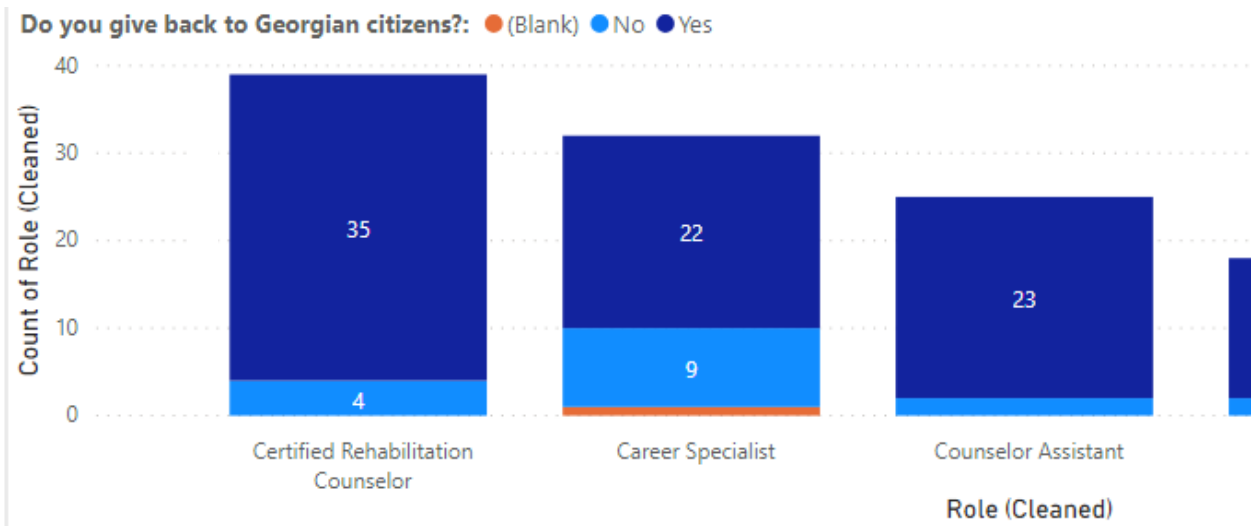
Choose to Work (Cleaned) ● To help people ● Benefits ● Question added ... ● Did not answer ● Mission ● Like the work ● Job security ● Unknown ● Like their team ● Qualified ● To give back ● For the experi...



# VR CULTURE: GIVING BACK

Majority of staff feel like they give back to Georgia citizens; however, VR's success outcomes seem disconnected from that belief.

- Almost 88% of VR staff polled stated they feel like they give back to GA citizens.



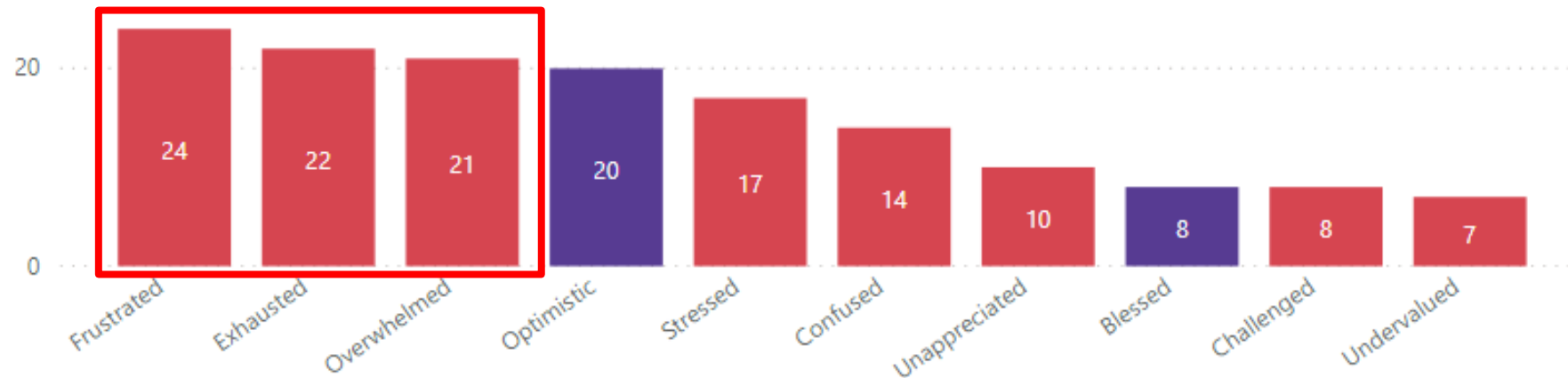
# VR CULTURE: WORKING AT VR

VR's poor success outcomes leads to negative feelings about working at VR.

- 83% of staff polled stated they have negative feelings when asked, “Describe in a single word how you feel about working at GVRA.”
- The most common responses were **frustrated, exhausted, and overwhelmed**.

How do you feel working at GVRA?

● Negative ● Positive



# VR CULTURE: WHAT VR OFFICES ARE NOT TALKING ABOUT BUT SHOULD BE

An overwhelming number of VR staff had negative feelings about working at VR; however, there were topics that were not spoken about enough.

## Client-Focused Issues

- We received substantively fewer comments and interactions in workshops where participants were asked to consider the VR process from the client perspective.
- Many participants wanted to speak on their issues, complaints, or problems with the VR process and, more specifically, how it affected *them*, not the client.
- When staff expressed frustrations with workshops, they centered on their inability to vent their "true concerns," like pay, not how their environment does not support clients.

## Quality

- When staff raised issues such as communication from leadership, training, and provider relations, their concerns centered on the *quantity* of such resources; few cited the *quality* as a concern (or even as a positive).

## Internal VR Collaboration\*

- Staff are rarely encouraged to collaborate on behalf of a client. Teamwork was once valued and expected; today, it is a rarity for teams to collaborate for positive client outcomes (i.e., Counselors working in the field, Employment Services, Provider Relations, etc.).
- The culture of collaboration is so anemic that, when pressed for solutions in workshops, many staff never offered the simple idea of working together.
- Staff frequently complained that coworkers shirked responsibilities.

# KEY CULTURE RECOMMENDATIONS

Poor internal VR culture leads to poor external VR client outcomes. Most of these recommendations reiterate what we found in 2019's GVRA Administrative Assessment.

## Current Issue

Observations from the field show that at large, VR leaders and staff are not client-focused, instead they are focused on reports, data, and fixing the next fire.

## Impact

Rushing through the VR process to make a metric takes away from the client experience and integrity, especially when there are a lot of vacancies and staff is overstretched.

## Recommendation

Initiate cultural change program that starts with the development of Core Values, making the client at the center and infusing these Values into jobs and performance.

The relationship between the Atlanta administrative office and the field can be described as "Us vs. Them."

Offices in the field feel Admin in Atlanta are out of touch with staff and their needs based on their location and population they serve.

Reinstitute that Admin supports Field offices, not vice versa. Resources should be properly planned and tailored on a office-by-office basis.

Staff report experiencing an environment of favoritism regarding promotion opportunities, rather than merit-based promotions.

General communication issues and a lack of transparency fosters a culture of mistrust that manifests itself in low employee morale and heightened staff turnover.

Update the performance review and evaluation process. Create clear performance metrics that are specific such that promotions are based on merit.

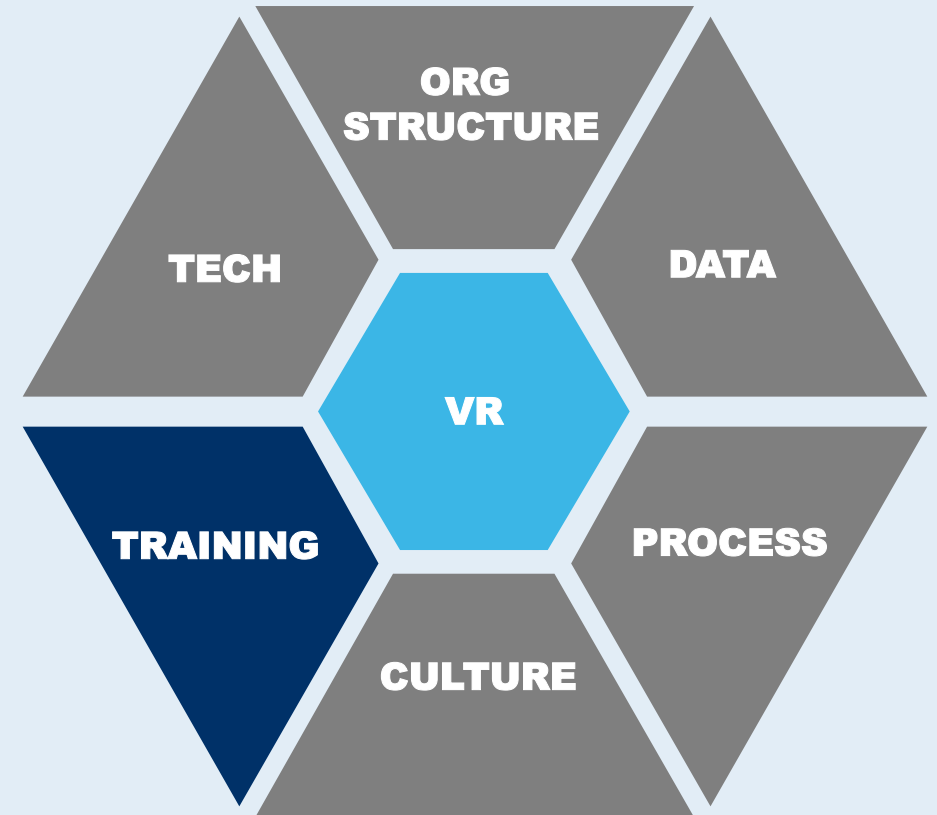
Formal meetings to provide top-down communication and to network are often cancelled or are non-existent.

Staff frequently report that top-down communication is reactionary and almost never in person.

Implement office and leadership wide meeting management. Reinstate annual leadership and quarterly regional meetings.

# TRAINING

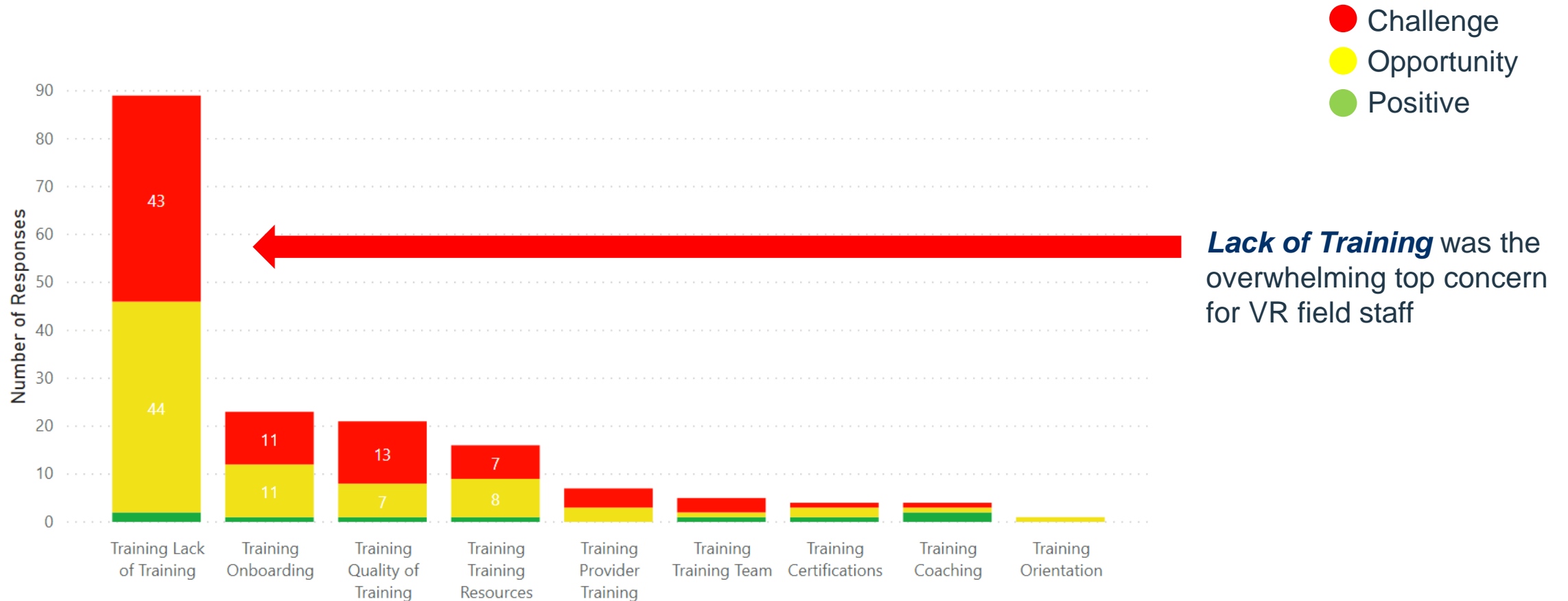
ONLY 19% OF STAFF POLLED FEEL WELL TRAINED TO WORK WITH VR'S CLIENTELE.





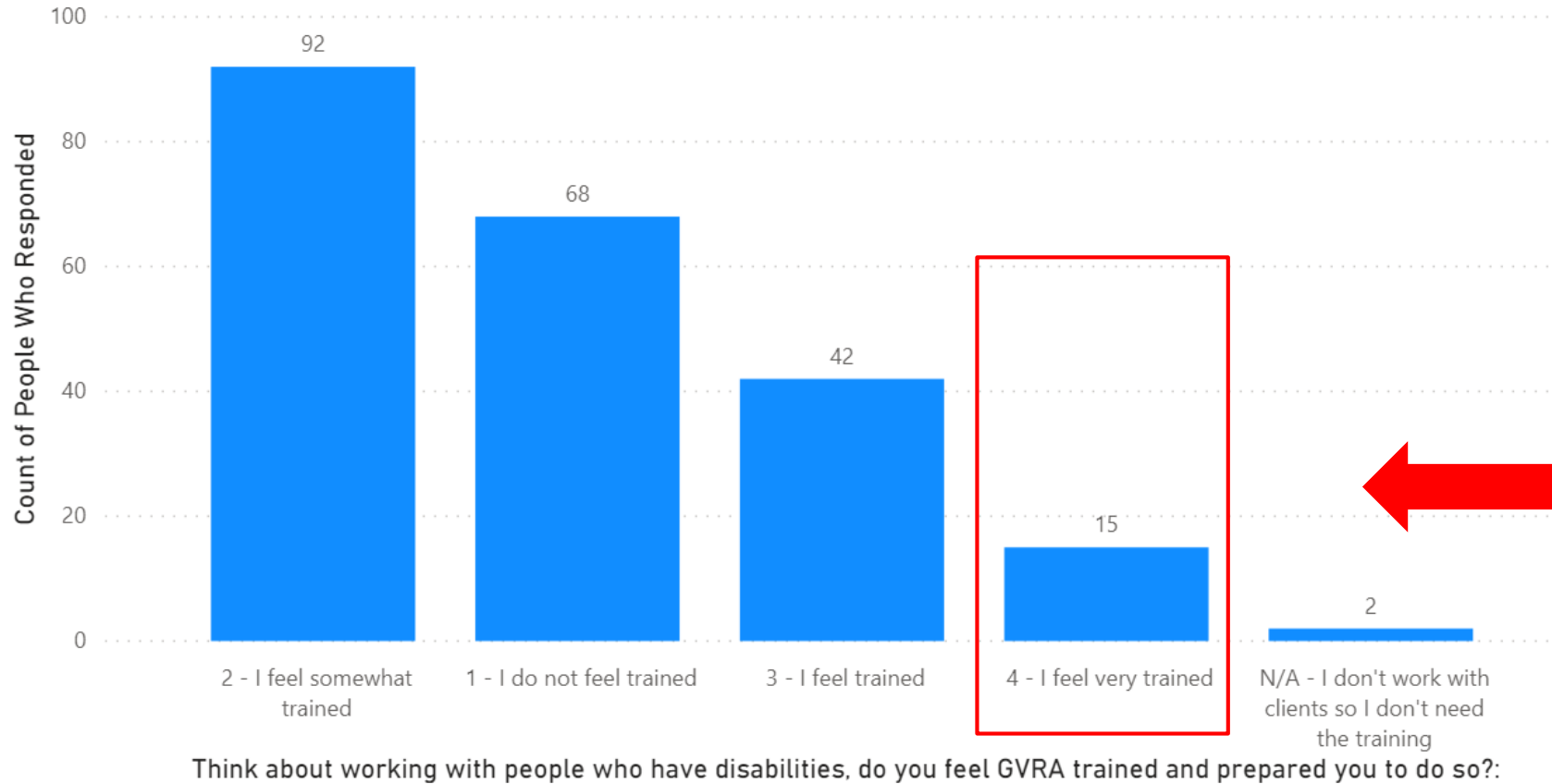
# KEY FINDINGS: LACK OF TRAINING

VR's inconsistent investment in staff development, training, and continuous learning leave personnel unequipped to carry out day-to-day tasks and results in insufficient service provision for clients.



# KEY FINDINGS: LACK OF TRAINING

The majority of VR staff feel unprepared to work with clients with disabilities.



Only 19% of staff  
polled feel **well trained**  
to work with VR's  
clientele

# KEY RECOMMENDATIONS: VR TRAINING STRATEGY

To address prevalent employee skill and knowledge gaps, we recommend that VR prioritize the following:

- **Administer a statewide survey** with the goal of identifying staff training needs within VR in order to make strategic training decisions. Highlight skills gaps that are interfering with VR's mission, budget control, and process efficiency. **Gauge staff preferences and feedback on training topics, methods**, trainer qualifications, etc.
- Prioritize VR training needs by those with the highest organizational impact and **develop a training implementation timeline and budget**.
- **Create Training positions at the district-level** that focus on curriculum development, learning management system maintenance, and periodic training, and incorporate these responsibilities into the job description. Build staff training responsibilities into the job descriptions of middle managers, supervisors, and coordinators within VR. Assign district-level coordinators with the development of role-specific training.
- **Develop and administer annual VR trainings** and make participation mandatory. Require that every VR employee complete critical *security, ethics, harassment, and disability awareness* trainings. Tie training completion to staff performance metrics, raises, and promotability.
- **Revamp VR's Learning Management System (LMS)** to track employee training history and suggest ongoing courses for professional development.

# GUIDING PRINCIPLES: TRAINING FOR IMPACT

For high-impact training efforts, we recommend VR consider the following:

## Design and Development

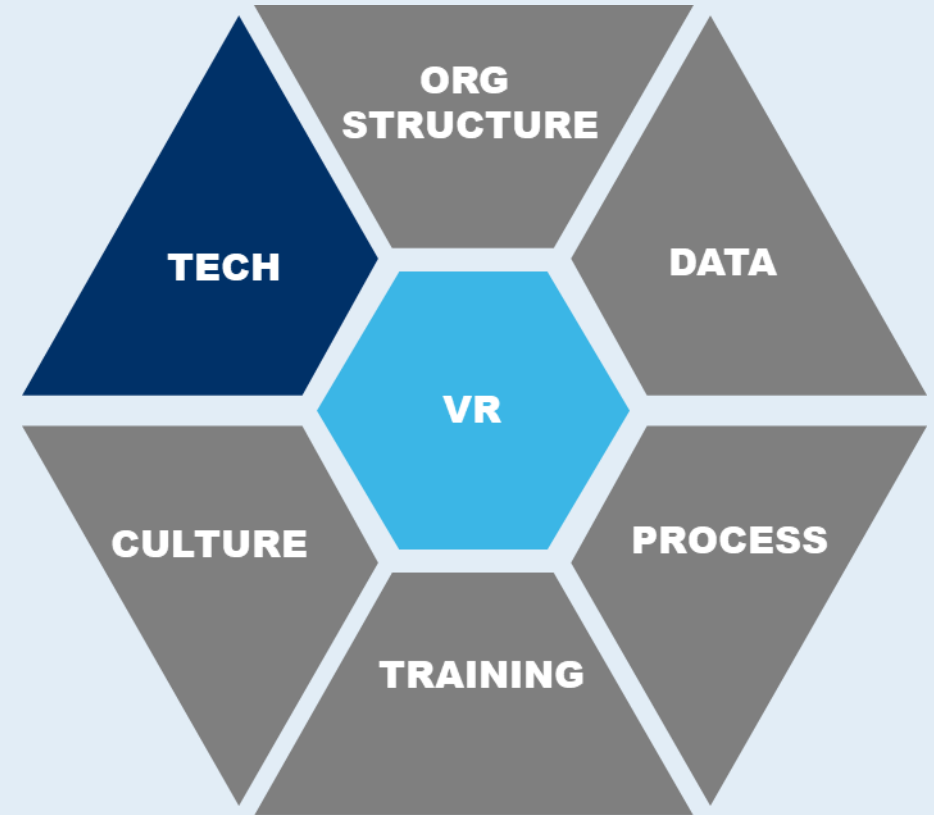
- Assume limited value from lengthy client manuals and user guides given the expected level of customization for staff, and frequent policy updates. Utilize Quick Reference Options in (LMS).
- Structure the curriculums for annual, mandatory trainings for maximum flexibility among VR roles.
- Create short and concise trainings in order to reduce information overload.
- Design courses to take a story-driven, scenario-based approach for learner engagement.
- Standardize modules to allow for re-use across VR field offices.

## Delivery

- Limit “on your own” eLearning during VR culture change period in order foster more communication and collaboration.
- Provide opportunities for structured and supported reinforcement within office teams.
- Leverage context based help in LMS, and link to Quick Reference Guides.
- Establish consistent feedback mechanisms to leverage employee feedback on training methods and effectiveness for continuous improvement.

# TECHNOLOGY

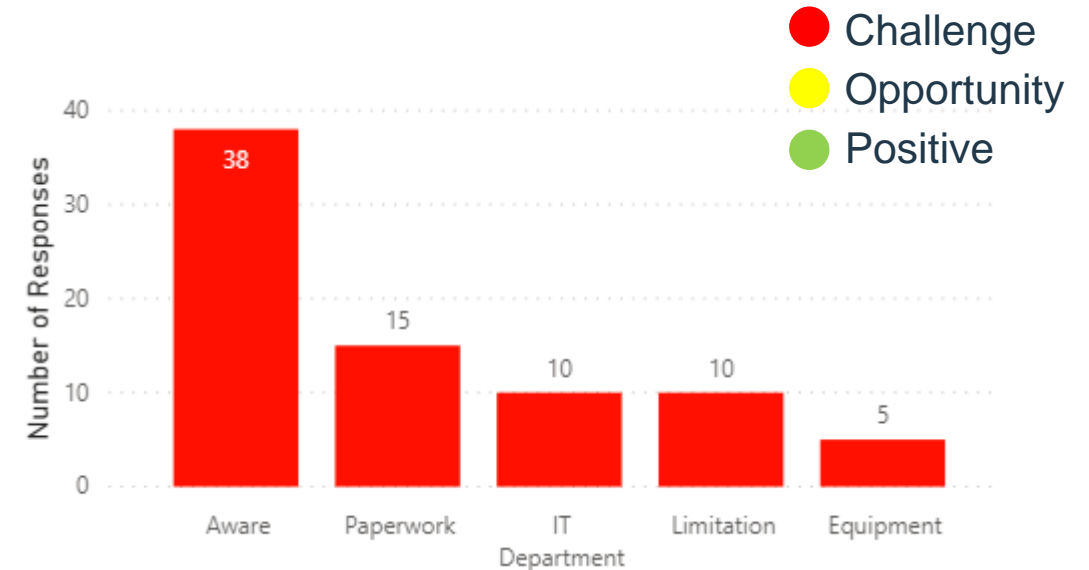
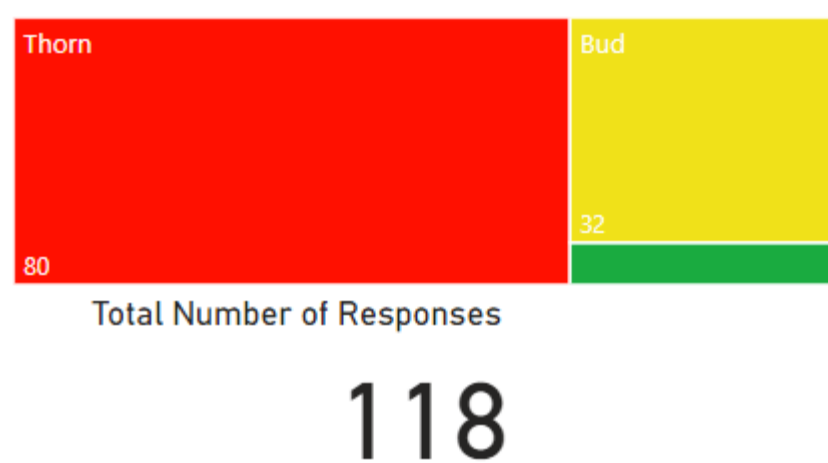
VR TECHNOLOGY IS NOT ACCESSIBLE  
FOR VR'S OWN STAFF WITH  
DISABILITIES.



# KEY TECHNOLOGY FINDINGS IN VR

Field staff routinely raised issues about VR's technological platform, namely that it fails to simplify and automate the rehab process and their daily tasks.

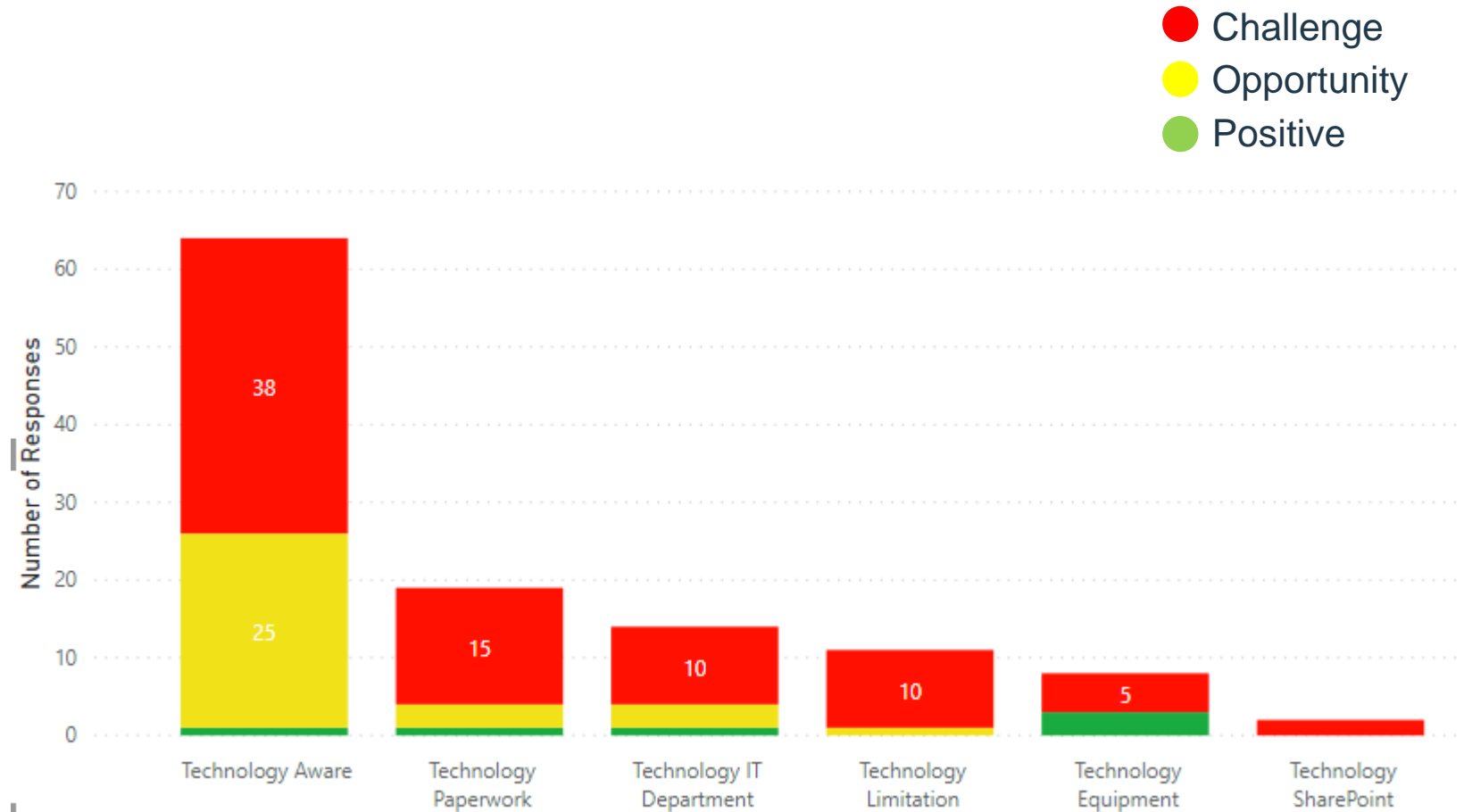
- 10% of all employee feedback was centered on technology, with the overwhelming percentage being negative.
- Most of the frustration centered on Aware and the lack of training on and customization of the tool.



# KEY TECHNOLOGY FINDINGS IN VR

Field staff repeatedly criticize the Aware system and, particularly its documentation burden and lack of practical utility in their day-to-day work.

- The Aware system still requires users to scan documents – 90% of staff who responded stated documentation in Aware took up majority of their time.
- All signatures are obtained manually instead of electronically.
- Checks to clients are lost in the mail.
- Aware is not user friendly, specifically for visually impaired staff.





# KEY TECHNOLOGY RECOMMENDATIONS

## Current Issue

## Impact

## Recommendation

Aware still requires users to scan client documents in.



Manually documenting and scanning documents into Aware takes too much time and reduces counselor ability to actually work with their clients.



Enhance Aware to support electronic templates for counselors to fill out and store easily, removing need to scan paper documents. Buy and use full modules in Aware and roll-out properly with superusers and User Acceptance Testing.

Aware is not user-friendly for visually impaired staff.



VR's mission is to help people with disabilities who seek employment to have access to technology; however they are not applying the same value to their own staff.



Conduct evaluation on available Aware training and assess where it is not accessible for visually impaired staff. Assess how Aware can be better enhanced and paired with JAWS and similar assisted technology.

There is no electronic method of signing documents and providing checks to providers and clients.



Staff are forced to wait on physical people to sign documents and big checks are being lost in the mail causing further delay in providing client services.



Utilize Automated Clearing House (ACH) electronic payments and electronic signatures.

# OUTLINE

- 1 EXECUTIVE SUMMARY
- 2 RESEARCH METHODOLOGIES
- 3 ASSESSMENTS | OBSERVATIONS | RECOMMENDATIONS
- 4 ROADMAP & NEXT STEPS
  - RECOMMENDATIONS AND SCORING
- 5 APPENDIX



# COMPREHENSIVE RECOMMENDATIONS

MAJORITY OF PROJECTS  
RECOMMEND ARE RELATIVELY  
LOW EFFORT FOR VR WITH HIGH  
BENEFIT.

## GVRA



GEORGIA VOCATIONAL  
REHABILITATION AGENCY

# LONG-TERM PROJECT BENEFIT RATING

Accenture identified a high, medium, and low benefit rating for each of the projects in each of the five benefit categories identified in collaboration with GVRA and VR executive leadership. Details on scoring can be found in Appendix A.

Project Inventory	Description	PROJECT BENEFIT FIT RATING				
		Improves Organizational Effectiveness	Improves Budget Control	Improves Performance Management	Improves Data Quality & Reporting	Simplifies & Standardizes VR Processes
Project 1	Develop Clear Job Descriptions	High	High	High	Medium	High
Project 2	Improve Hiring, Recruitment, and Retention Efforts	High	Medium	High	Low	High
Project 3	Create VR Training Strategy	High	Medium	High	High	Medium
Project 4	Increase Employer Outreach in Local Communities	Medium	Low	Medium	Medium	High
Project 5	Improve Vendor/Provider Relations	Medium	High	Medium	High	High
Project 6	Conduct Provider Needs Assessment	Low	High	Low	Low	High
Project 7	Standardize Client Intake and Onboarding	High	High	Medium	Medium	High
Project 8	Restructure VR Org Chart	High	High	High	Medium	High
Project 9	Standardize VR Rehab Process	High	High	High	High	High
Project 10	Asses VR Case Management Spending by Office	Medium	High	Medium	High	High
Project 11	Create VR Strategic Plan	High	Medium	High	Medium	High
Project 12	VR Culture Transformation & Performance Transparency	High	Medium	High	Medium	High
Project 13	Technology Assessment & Enhancement	High	High	High	High	High
Project 14	Improve WIPA Program Within VR	High	Low	High	High	High
Project 15	Simplify and Automate VR Application and Eligibility Process	Medium	Medium	Low	High	High

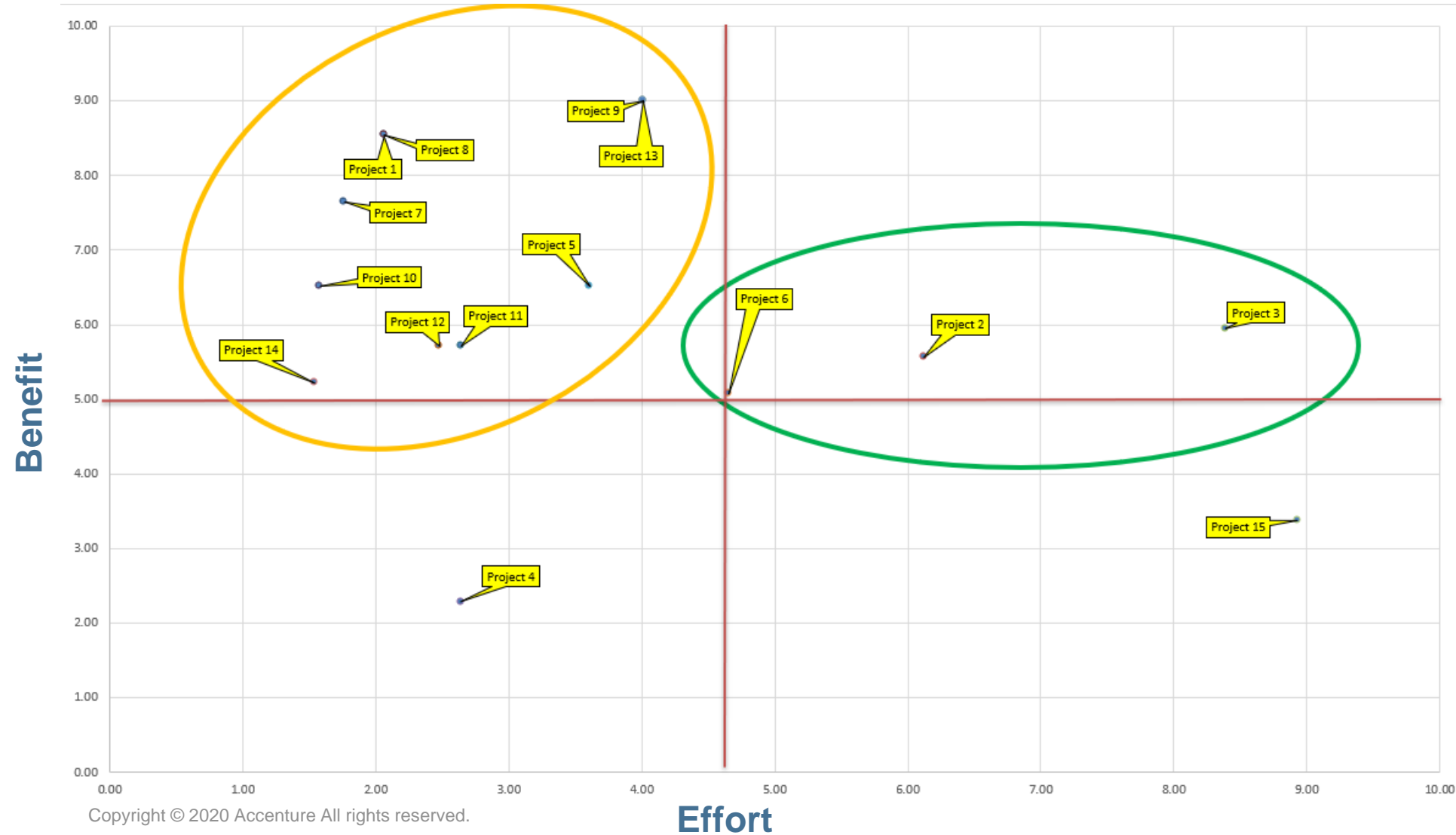
# LONG-TERM PROJECT EFFORT RATING

Accenture identified a high, medium, and low effort rating for each of the projects in each of the five Effort categories identified in collaboration with GVRA and VR executive leadership. Details on Scoring can be found in Appendix A.

<i><b>Project Inventory</b></i>	<i><b>Description</b></i>	<i><b>PROJECT EFFORT FIT RATING</b></i>				
		Requires Funding	Requires Skill Set Not Present Currently at GVRA	Requires a Change to Technology	Requires Change to Org Structure and/or Policy	Requires Coordination with External Stakeholders
Project 1	Develop Clear Job Descriptions	Medium	Low	Low	High	Low
Project 2	Improve Hiring, Recruitment, and Retention Efforts	High	Medium	Low	Medium	High
Project 3	Create VR Training Strategy	High	High	High	Medium	Medium
Project 4	Increase Employer Outreach in Local Communities	Medium	Medium	Low	Low	Medium
Project 5	Improve Vendor/Provider Relations	Medium	Medium	Medium	High	High
Project 6	Conduct Provider Needs Assessment	Medium	High	Low	Low	High
Project 7	Standardize Client Intake and Onboarding	Low	Medium	Low	High	Medium
Project 8	Restructure VR Org Chart	Medium	Low	Low	High	Low
Project 9	Standardize VR Rehab Process	Medium	High	Low	High	Low
Project 10	Asses VR Case Management Spending by Office	Low	Medium	Low	High	Low
Project 11	Create VR Strategic Plan	Medium	Medium	Low	Low	Medium
Project 12	VR Culture Transformation & Performance Transparency	Medium	Medium	Low	Medium	Low
Project 13	Technology Assessment & Enhancement	Medium	Medium	High	Medium	Medium
Project 14	Improve WIPA Program Within VR	Low	Low	Medium	Medium	Medium
Project 15	Simplify and Automate VR Application and Eligibility Process	High	High	High	Medium	High

# LONG-TERM PROJECT BENEFIT/EFFORT MAPPING

Mapped below are all the projects with their relative benefits and efforts. Majority of the projects are in two groups: High benefit, Low effort and High effort, Low benefit. Details on Scoring can be found in Appendix A.



RANK	PROJECT ID	BENEFIT WEIGHTED SCORE	EFFORT WEIGHTED SCORE	RANK SCORE
1	Project 1	8.70	1.00	8.70
2	Project 2	8.70	1.00	8.70
3	Project 3	8.70	1.00	8.70
4	Project 4	8.70	1.00	8.70
5	Project 5	8.70	1.30	6.69
6	Project 6	5.32	1.00	5.32
7	Project 7	8.75	2.22	3.94
8	Project 8	6.03	1.93	3.12
9	Project 9	2.92	1.00	2.92
10	Project 10	5.25	1.93	2.72
11	Project 11	2.61	1.00	2.61
12	Project 12	2.04	1.00	2.04
13	Project 13	2.04	1.00	2.04
14	Project 14	4.87	2.69	1.81
15	Project 15	1.74	1.00	1.74

# HIGHEST VALUE LONG-TERM PROJECTS

These projects are low effort, high benefit. VR should prioritize these projects.

Project Inventory	Description
Project 1	Develop Clear Job Descriptions
Project 5	Improve Vendor/Provider Relations
Project 7	Standardize Client Intake and Onboarding
Project 8	Restructure VR Org Chart
Project 9	Standardize VR Rehab Process
Project 10	Asses VR Case Management Spending by Office
Project 11	Create VR Strategic Plan
Project 12	VR Cultural Transformation & Performance Transparency
Project 13	Technology Assessment & Enhancement
Project 14	Improve WIPA Program within VR



# MEDIUM VALUE LONG-TERM PROJECTS

These projects are higher efforts and lower relative benefit. They are still important projects VR should address but they are 2<sup>nd</sup> for prioritization.

Project Inventory	Description
Project 2	Improve Hiring, Recruitment, and Retention Efforts
Project 3	Create VR Training Strategy
Project 6	Conduct Provider Needs Assessment

# OTHER LONG-TERM PROJECTS TO CONSIDER

These two projects did not fit neatly into either category. VR should examine these projects on their own and decide priority.

Project Inventory	Description
Project 4	Increase Employer Outreach in Local Communities
Project 15	Simplify/Automate VR Application & Eligibility Process

# VR'S CURRENT IMPROVEMENT EFFORTS

Since the beginning of the VR assessment, VR has made progress in a number of areas. The following are ongoing reform efforts, whose successes may complement our findings and/or render some of our recommendations unnecessary.

## HR

- Hired new GVRA HR Director that will support VR organization structural changes in role and job descriptions, as well as hire district-level HR reps and streamline recruiting and hiring process.
- Implementing improvement opportunities from GVRA Administrative Assessment submitted mid-2019.
- Developing recruiting plan with universities with Rehab programs to hire more CRCs.
- Created VR security plan.

## Fiscal

- Hired new GVRA Fiscal Operations Director that will support VR offices and providers with budget issues.

## IT

- VR is enhancing Aware by turning on ACH electronic checks, group authorizations, and updated Financial Needs Assessment module.
- Created taskforce to work with VR staff members on further enhancing Aware and reporting capabilities.

## Provider Relations

- Update Provider Outsourcing Manual that will clarify processes and standards for application, complaint, contract/payment, evaluation, support and assistive services, and academic vocational training.

## Strategy

- Drafted VR State Plan and submitted for public comment on January 10, 2020.

## Culture

- GVRA and VR leadership plan to visit field offices throughout the State once all Directors are hired.

# ROADMAP AND NEXT STEPS

GVRA



GEORGIA VOCATIONAL  
REHABILITATION AGENCY

# VR ROADMAP

Accenture has identified a series of projects to address VR's present challenges.

	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020	Jul 2020	Aug 2020	Sept 2020	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021
Culture Projects													
	Enhance Culture Change and Performance Mgt												
People Projects	Restructure VR Org Chart*												
	Clarify Job Descriptions*												
	Redesign Hiring/Recruiting*												
Process Projects		Control VR Case Management Spending											
		Standardize VR Rehab Process											
		Create VR Strategic Plan			Enhance Client Orientation								
		Enhance VR Application & Eligibility											
				Enhance WIPA									
	Revamp Training*												
	Revamp Provider Relations*												
		Conduct Provider Needs Assessment					Perform Employer Outreach						
Tech Projects	Modify Aware and other Tech Enhancements for Automation and Accessibility*												

\* Denotes projects that have begun

# CHANGE MANAGEMENT CONSIDERATIONS

As VR approaches these change projects, proactively addressing the following change management considerations will enable success as programs move forward.

## Why We Need to Change

- Georgia VR's declining performance over the past years on helping Georgians with disabilities find and maintain gainful employment
- Poor internal organizational culture and high staff turnover

## Current Challenges

- Lack of focus on putting the client at the center of each VR objective and process step
- Lack of strategic integration and collaboration between VR departments
- Lack of number and quality VR leadership

## Change Considerations

- Low top down directive and communication
- Lack of empowerment and training to make decisions
- Unclear decision rights and points of accountability
- Low accountability due to silos amongst VR departments
- Low incentive to change
- Unclear delineations in job responsibilities and performance metrics

## Staff Specific Challenges

- Already overstretched staff
- High number of vacancies
- Lack of time and bandwidth from leaders because they are constantly putting out fires and reacting
- Jadedness from too many leadership and org changes that have happened in the past few years

# KEY SUCCESS FACTORS

Based on Accenture's experience with similar complex change journeys, several key success factors should be incorporated into the overall approach.



## Execution Of Strategy

- **Quick Wins**  
Build momentum and buy-in for positive reform.
- **Outcome Obsessed**  
Clear targets, milestones and value tracking tied to financial, operational and talent objectives.
- **Sustained Intensity**  
Work in 2 to 3 month sprints in implementing recommended projects to achieve positive client and staff outcomes.
- **Push Status Quo**  
Leadership visibility to all work and recognition for those who go above and beyond.



## Coaching-Based Leadership

- **Accountability**  
Clear accountability and decision-rights across the organization.
- **Talent Promotion**  
Focus on rewarding high potential talent with roles to create material impact.
- **Incentive Alignment**  
Align senior leadership's performance metrics to VR staff and overall organization performance.
- **Developing Leaders**  
Executive coaching model to drive adoption of mindsets and behaviors.



## Communication

- **Reinforcement**  
Transparency of VR's journey to positively change in public/private settings.
- **Story Telling**  
"Unveiling" pieces of the vision and results 4+ times annually; encourage peer-to-peer sharing of experiences.
- **Education**  
Clear articulation of "why and what" to managers, staff, and stakeholders.



# OUTLINE

- 1 EXECUTIVE SUMMARY
- 2 ASSESSMENTS | OBSERVATIONS | RECOMMENDATIONS
- 3 KEY THEMES
- 4 ROADMAP & NEXT STEPS
- 5 APPENDIX



# APPENDIX A

## PROJECT SCORING METHODOLOGY

**GVRA**



GEORGIA VOCATIONAL  
REHABILITATION AGENCY

# ISSUE ANALYSIS APPROACH

Accenture documented issues and associated solutions (i.e., projects) for VR. These were evaluated for their relative benefit and effort to identify the most beneficial opportunities for improvement for the Agency.

- Accenture worked with GVRA and VR executive leadership to confirm the criteria to be used to assess the relative “benefit” and “effort” for each improvement opportunity.
- Accenture facilitated a discussion with GVRA and VR executive leadership to establish weightings for each benefit and effort type.
- Once the weightings (i.e., relative importance) of each type of benefit and effort were established, Accenture reviewed each identified improvement initiative against these benefit/effort criteria.
- Accenture then categorized potential improvement opportunities into categories (i.e., quick wins, medium term, long term).

# BENEFIT AND EFFORT CRITERIA DEFINITIONS

Accenture worked with GVRA and VR executive leadership to establish benefit and effort criteria and associated definitions.

Benefit Criteria	Description
Improves Organizational Effectiveness	The degree by which a project or action clarifies roles, eliminates spans and layers, normalizes work-loads, creates clear communication channels and creates a more efficient office structure.
Improves Budget Control	The degree by which a project or action improves VR's ability to have an accurate and timely view into the budget down to an office level, as well as to forecast for future spending.
Improves Performance Management	The degree by which a project or action contributes to the improved oversight and measurement of organizational impacts, training needs, and/or selection of employees for promotions, transfer, improvement plans, or termination.
Improves Data Quality & Reporting	The degree by which a project or action contributes to reliable, timely, relevant, and digestible data for compliance and outcome reporting.
Simplifies and Standardizes VR Processes	The degree by which a project or action improves consistency and standard operating procedures across all VR offices.

Effort Criteria	Description
Requires Funding	The degree to which a project or action requires new or additional funding.
Requires Skill Set Not Present Currently at GVRA	The degree to which a project or action requires training, upskilling, replacing and or hiring staff.
Requires a Change to Technology	The degree to which a project or action requires new or modified technology infrastructure (capital or IT).
Requires Change to Org Structure and/or Policy	The degree to which a project or action requires reorganization of departments and/or VR policy change and implementation.
Requires Coordination with External Stakeholders	The degree to which a project or action requires engagement with providers, vendors, etc.

# RELATIVE IMPORTANCE ANALYSIS - BENEFIT

Accenture worked with GVRA and VR executive leadership to confirm the relative importance of identified benefit types.

<i>Relative Importance Analysis</i>	<i>BENEFIT</i>						
	Improves Organizational Effectiveness	Improves Budget Control	Improves Performance Management	Improves Data Quality & Reporting	Simplifies & Standardizes VR Processes	Total	Weight
<i>BENEFIT</i>							
Improves Organizational Effectiveness		0.2	5	1	5	11.2	26%
Improves Budget Control	5		5	5	5	20	47%
Improves Performance Management	0.2	0.2		1	5	6.4	15%
Improves Data Quality & Reporting	1	0.2	1		1	3.2	8%
Simplifies & Standardizes VR Processes	0.2	0.2	0.2	1		1.6	4%
						42.4	100%

The Relative Importance table above displays weighted benefit criteria established with GVRA and VR executive leadership. The weighted benefit criteria is used again later in a scoring exercise where each improvement opportunity was reviewed and evaluated.

- The Benefit criteria *improves budget control* was determined to be the highest weighted benefit criteria during this exercise.
- The benefit criteria *simplifies and standardizes VR processes* was determined to be the lowest weighted benefit criteria.

# RELATIVE IMPORTANCE ANALYSIS - EFFORT

Accenture worked with GVRA and VR executive leadership to confirm the relative importance of identified effort types.

<i>Relative Importance Analysis</i>	<i>EFFORT</i>						
	Requires Funding	Requires Skill Set Not Present Currently at GVRA	Requires a Change to Technology	Requires Change to Org Structure and/or Policy	Requires Coordination with External Stakeholders	Total	Weight
<i>EFFORT</i>							
Requires Funding		10	5	10	5	30	49%
Requires Skill Set Not Present Currently at GVRA	0.1		5	5	5	15.1	24%
Requires a Change to Technology	0.2	0.2		5	5	10.4	17%
Requires Change to Org Structure and/or Policy	0.1	0.2	0.2		0.2	0.7	1%
Requires Coordination with External Stakeholders	0.2	0.2	0.2	5		5.6	9%
						61.8	100%

The Relative Importance table above displays weighted effort criteria established with GVRA and VR executive leadership. The weighted effort criteria is used again later in a scoring exercise where each improvement opportunity was reviewed and evaluated.

- The effort criteria ***requires funding*** was determined to be the highest weighted effort criteria during this exercise.
- The effort criteria ***requires change to org structure and/or policy*** was determined to be the lowest weighted effort criteria.

# BENEFIT AND EFFORT WEIGHTING

Accenture developed a scoring rubric to quantify the relative benefit and effort of each project.

<b>Weighting</b>	<b>BENEFIT</b>					
	Improves Organizational Effectiveness	Improves Budget Control	Improves Performance Management	Improves Data Quality & Reporting	Simplifies & Standardizes VR Processes	Total
<b>SCORING</b>						
Relative Importance Percentage	26%	47%	15%	8%	4%	100%
High	9	9	9	9	9	
Medium	3	3	3	3	3	
Low	1	1	1	1	1	

<b>Weighting</b>	<b>EFFORT</b>					
	Requires Funding	Requires Skill Set Not Present Currently at GVRA	Requires a Change to Technology	Requires Change to Org Structure and/or Policy	Requires Coordination with External Stakeholders	Total
<b>SCORING</b>						
Relative Importance Percentage	49%	24%	17%	1%	9%	100%
High	9	9	9	9	9	
Medium	3	3	3	3	3	
Low	1	1	1	1	1	

Note: The tables above display benefit and effort weighting criteria referenced previously, and scoring criteria with assigned number value. High, Medium, and Low (9, 3, and 1). Each improvement opportunity was assessed whether it would have a “High”, “Medium”, or “Low” impact in each of these above areas and these weightings and scores allow quantification of the projected summary benefit and effort for each opportunity. This approach was used to generate the project benefit/effort scatterplot included in this report.



# APPENDIX B

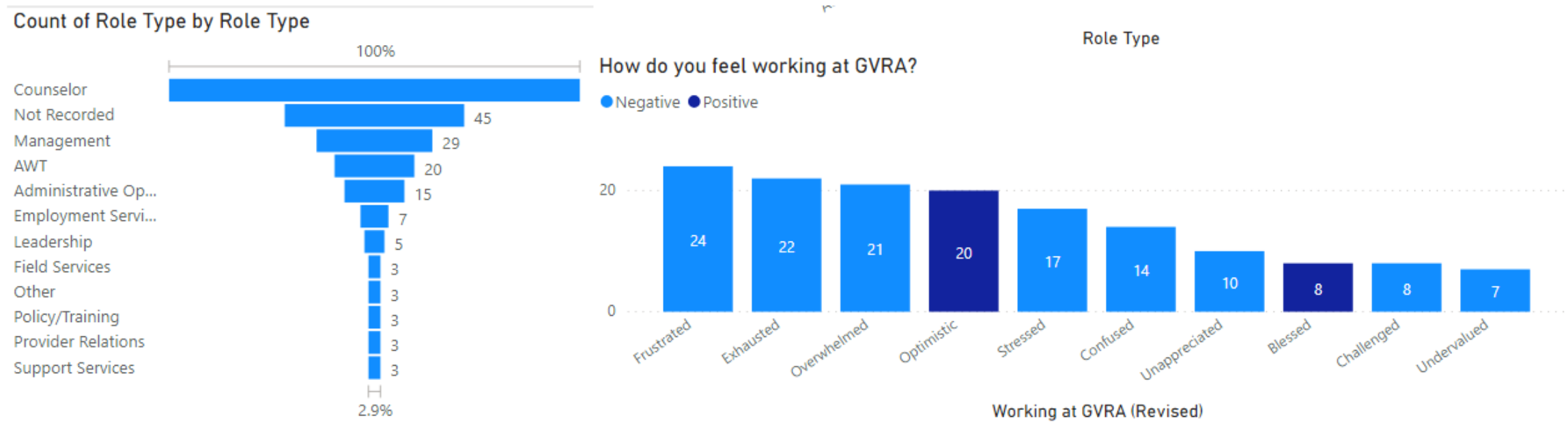
## MENTI LIVE POLLING RESPONSES

**GVRA**

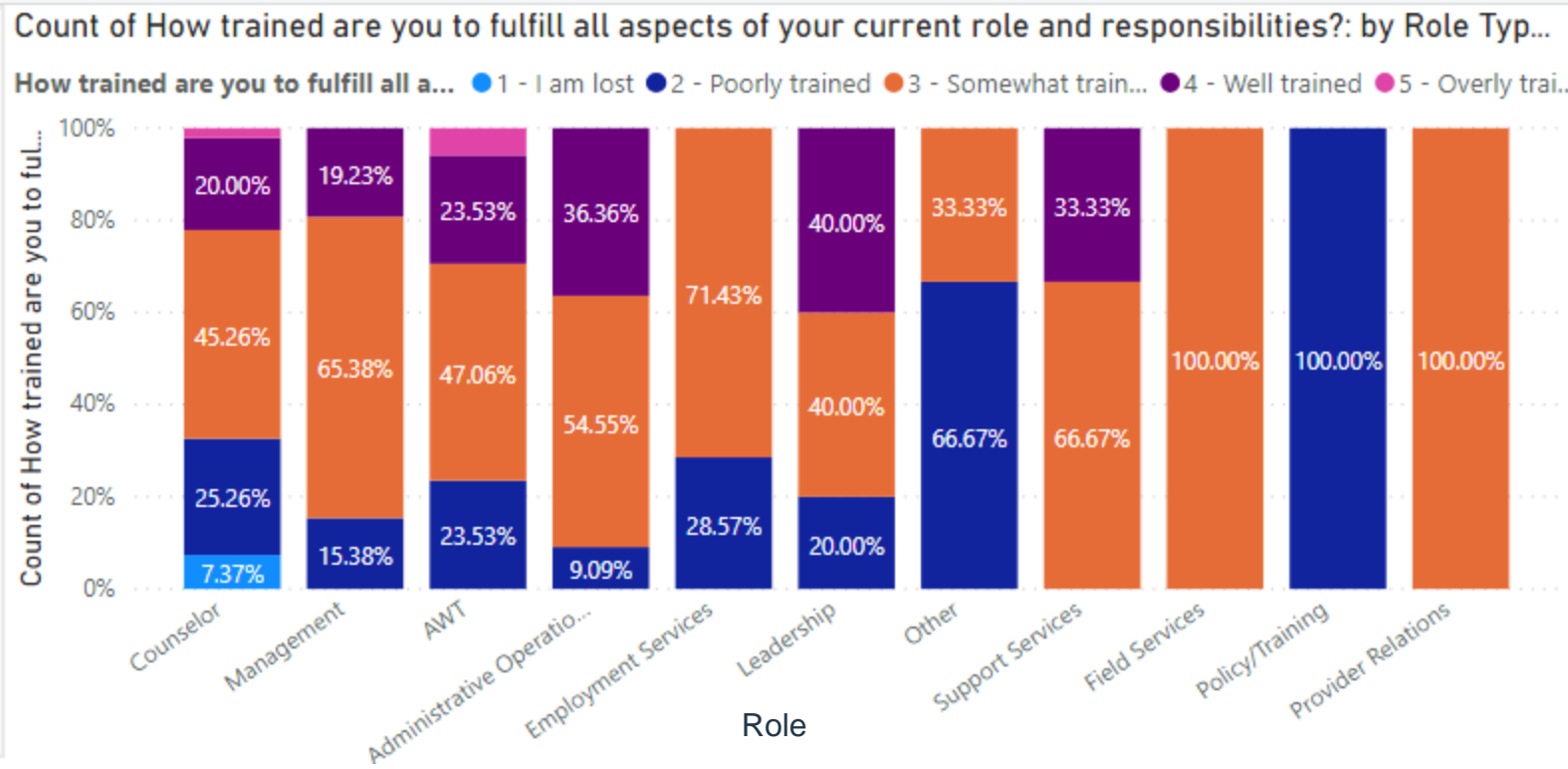
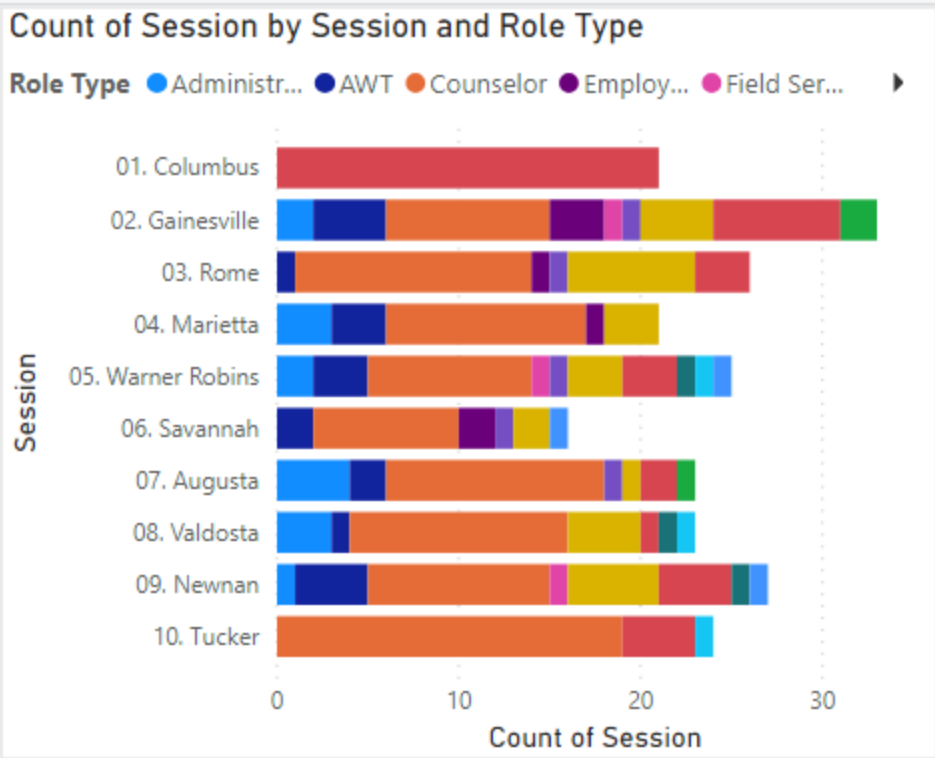


GEORGIA VOCATIONAL  
REHABILITATION AGENCY

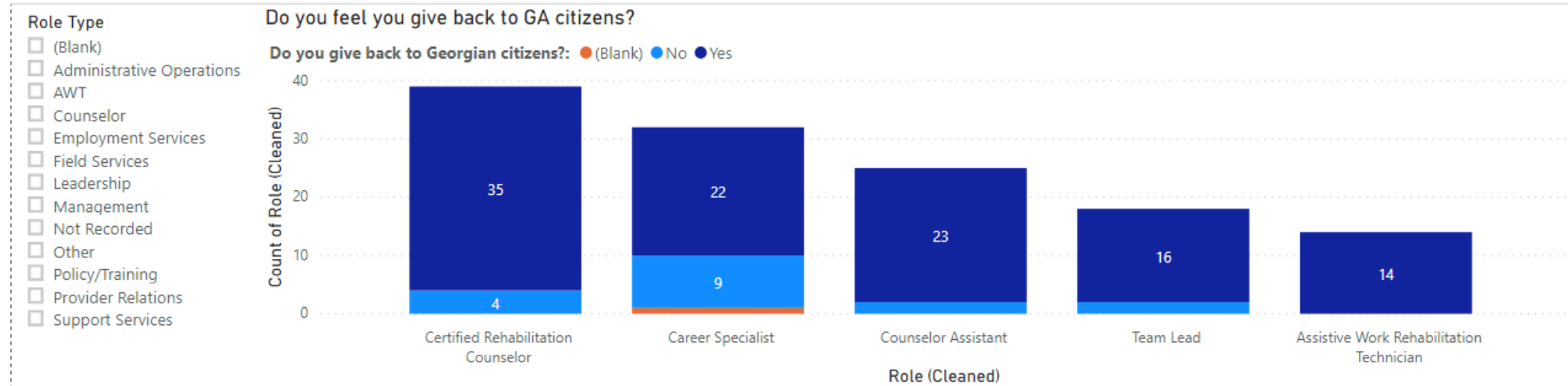
# POLL RESULTS: HOW DO YOU FEEL WORKING AT GVRA?<sup>DRAFT</sup>



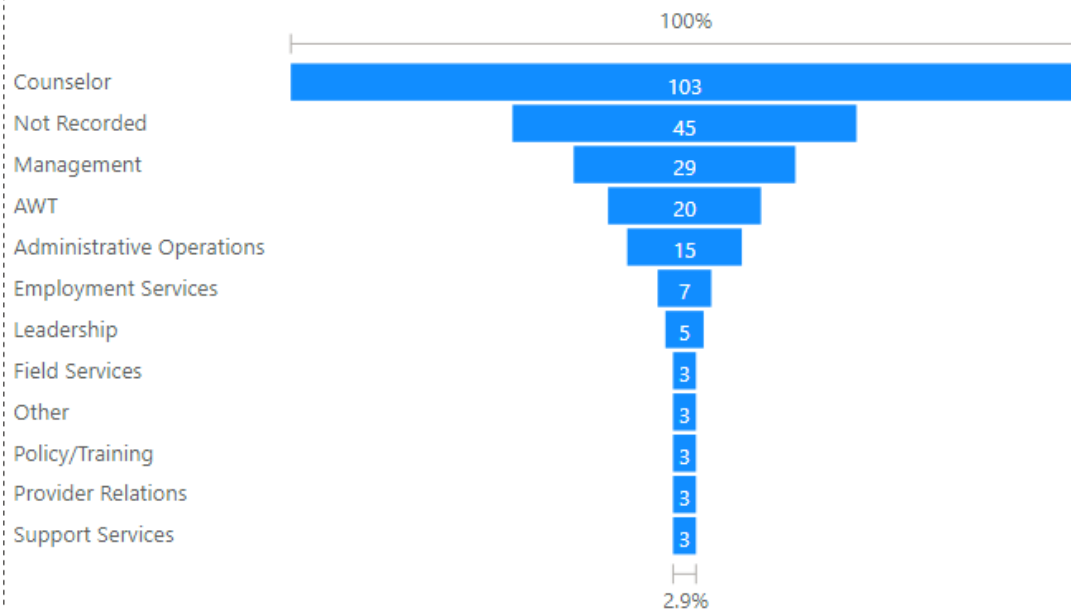
# POLL RESULTS: HOW TRAINED ARE YOU TO FULFILL ALL ASPECTS OF YOUR CURRENT ROLE?



# POLL RESULTS: DO YOU FEEL YOU GIVE BACK TO GA CITIZENS?

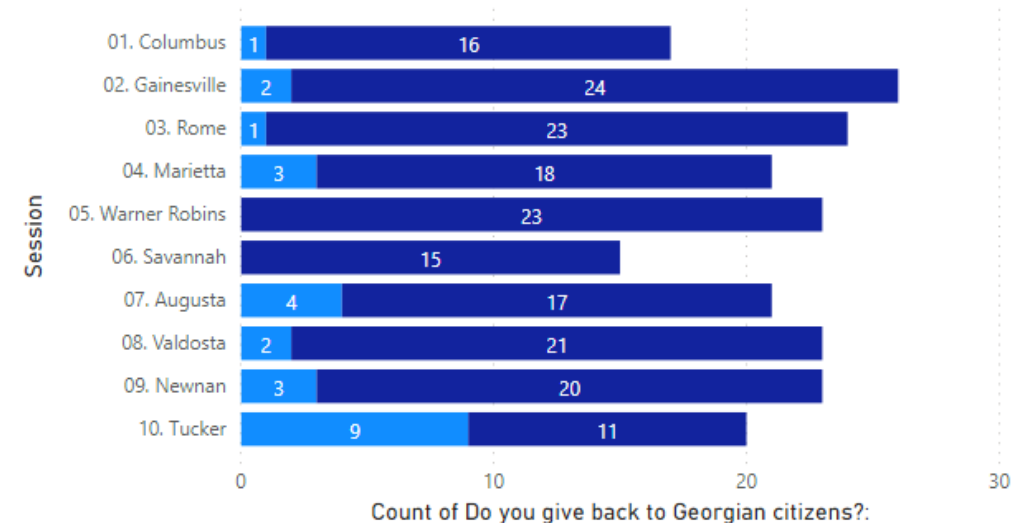


Count of Role Type by Role Type

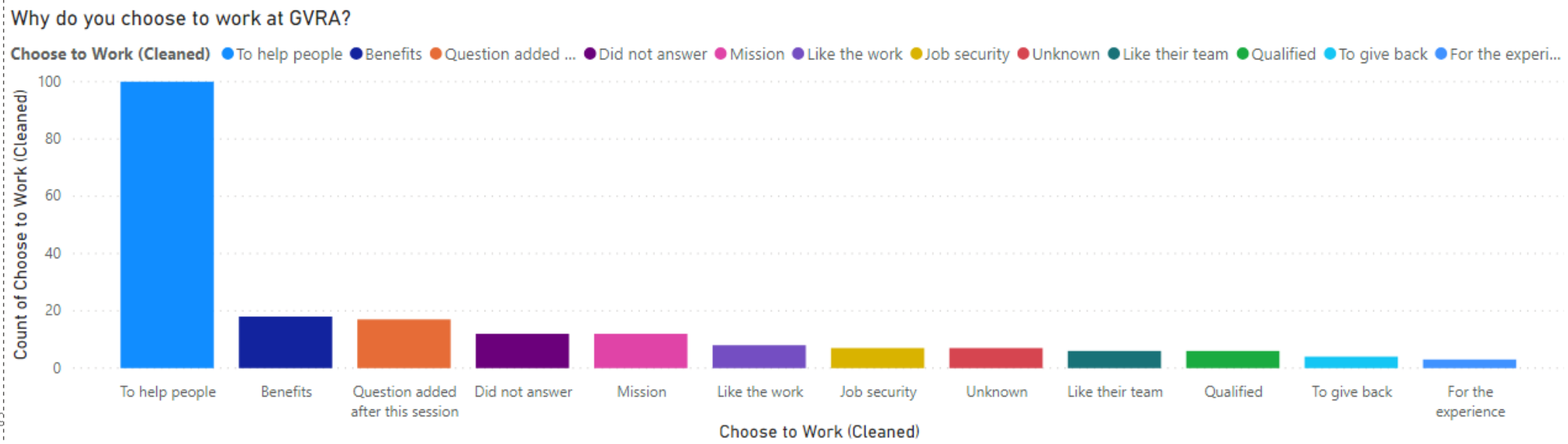
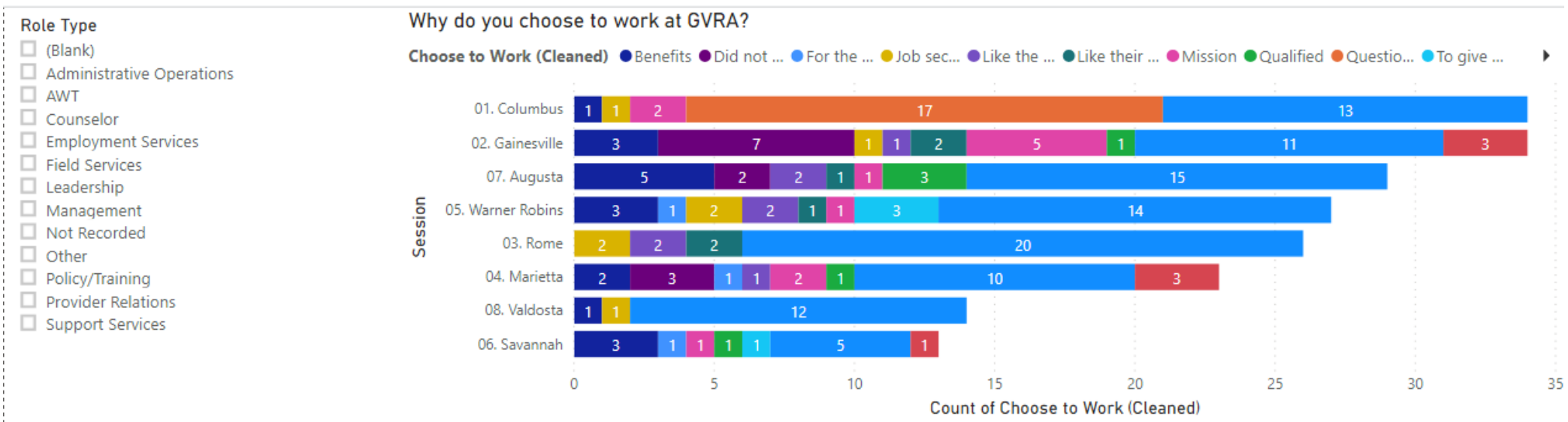


Do you feel you give back to GA citizens?

**Do you give back to Ge...** No Yes

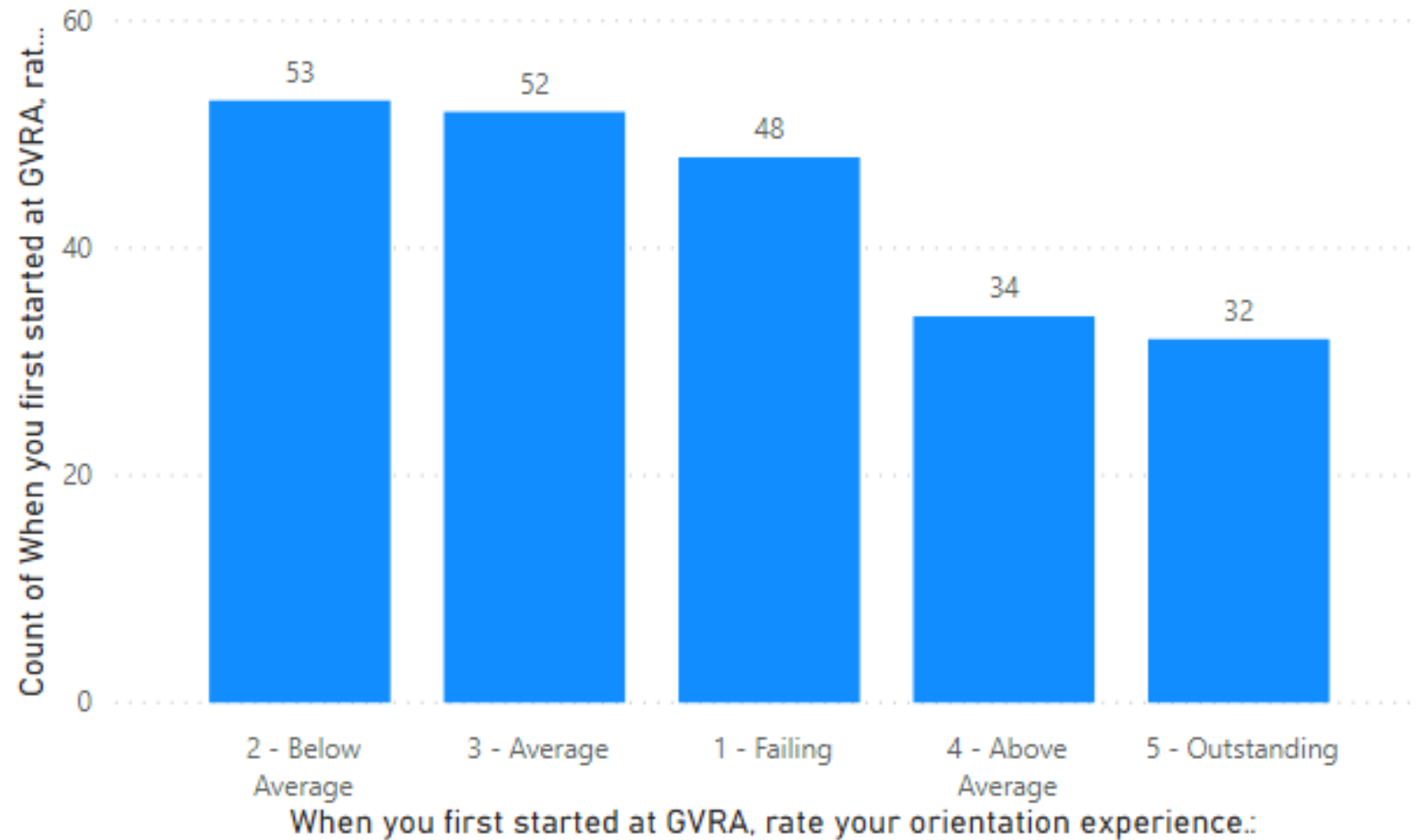


# POLL RESULTS: WHY DO YOU CHOOSE TO WORK AT GVRA?



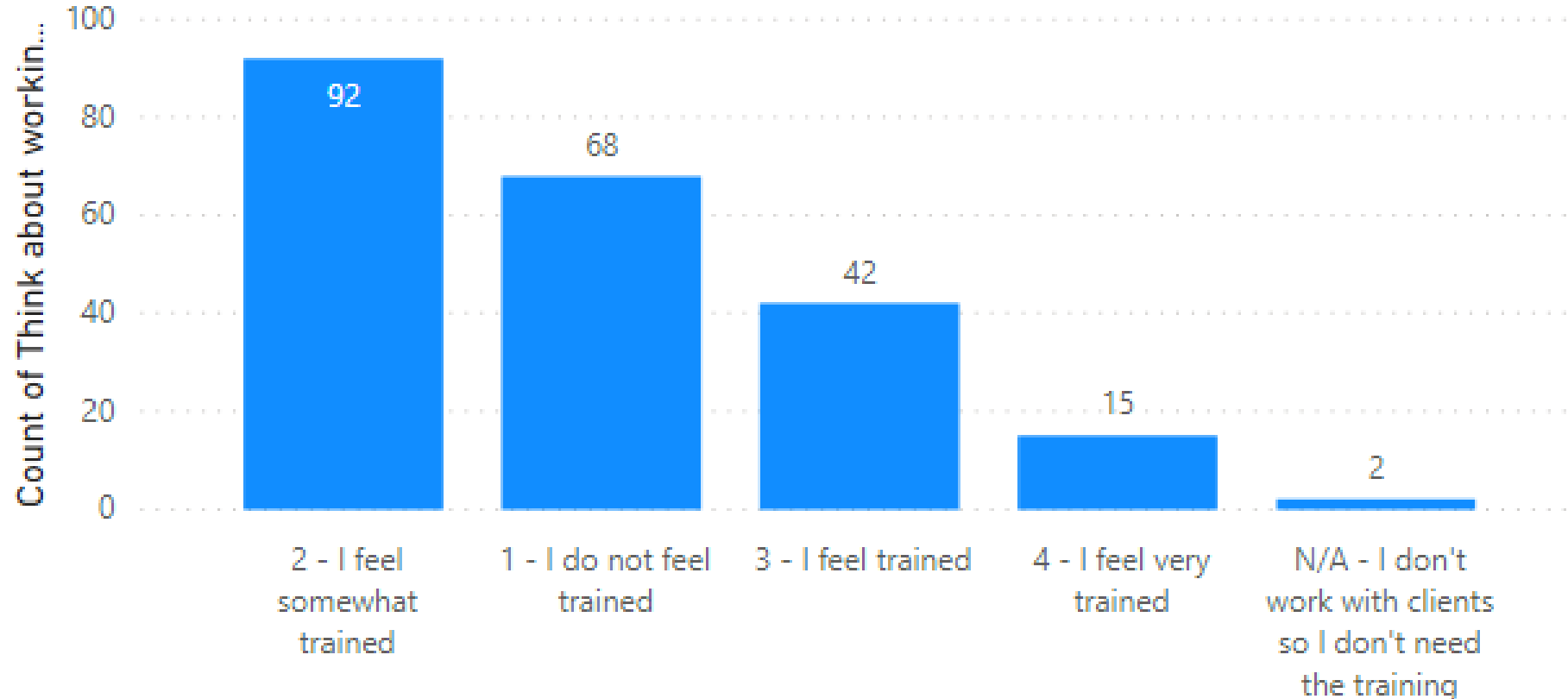
# POLL RESULTS: WHEN YOU FIRST STARTED AT GVRA, RATE YOUR ORIENTATION EXPERIENCE

Count of When you first started at GVRA, rate your orientation experience.: by W...



# POLL RESULTS: DO YOU FEEL GVRA TRAINED YOU TO WORK WITH PEOPLE WITH DISABILITIES?

Count of Think about working with people who have disabilities, do you feel GVR...

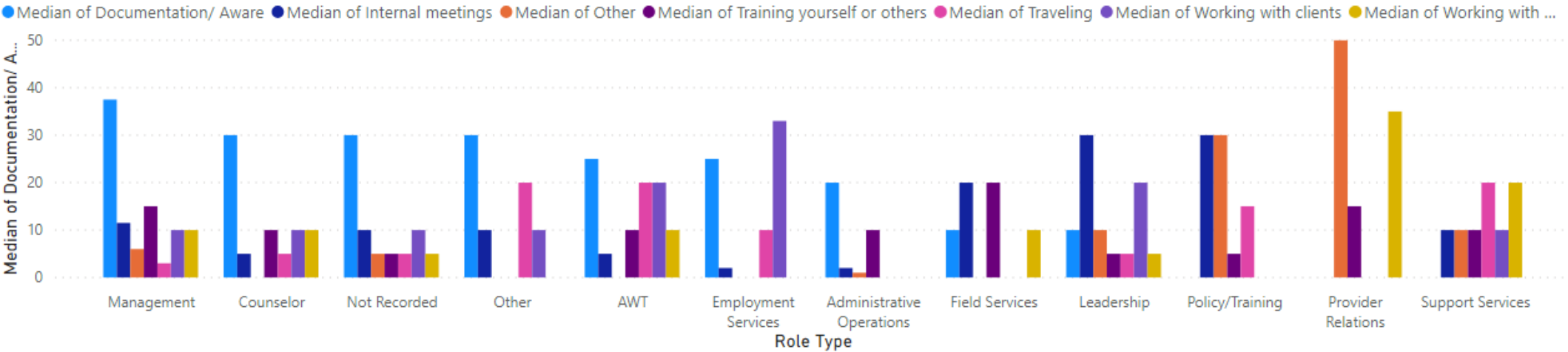


Think about working with people who have disabilities, do you feel GVRA trained and p...



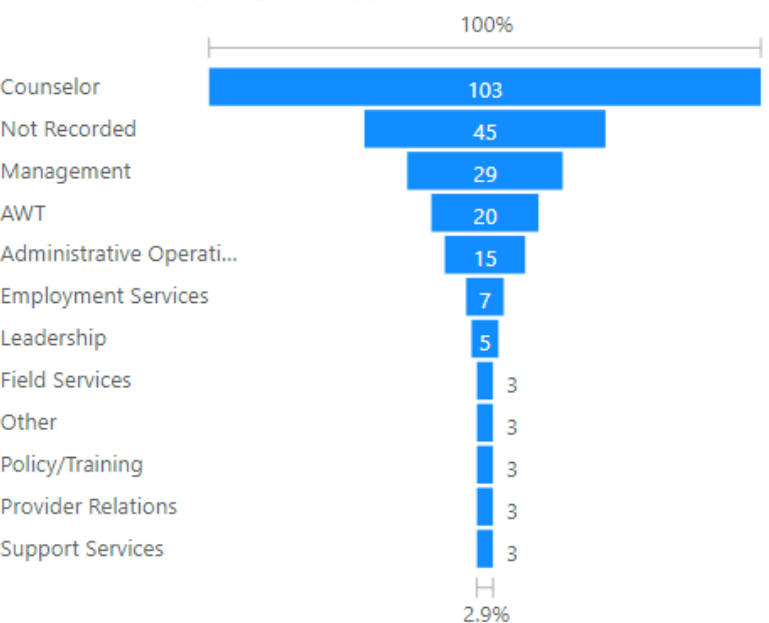
# POLL RESULTS: IN A GIVEN WEEK, WHAT TAKES UP MOST OF YOUR TIME (IN %)?

In a given week, what takes up most of your time?

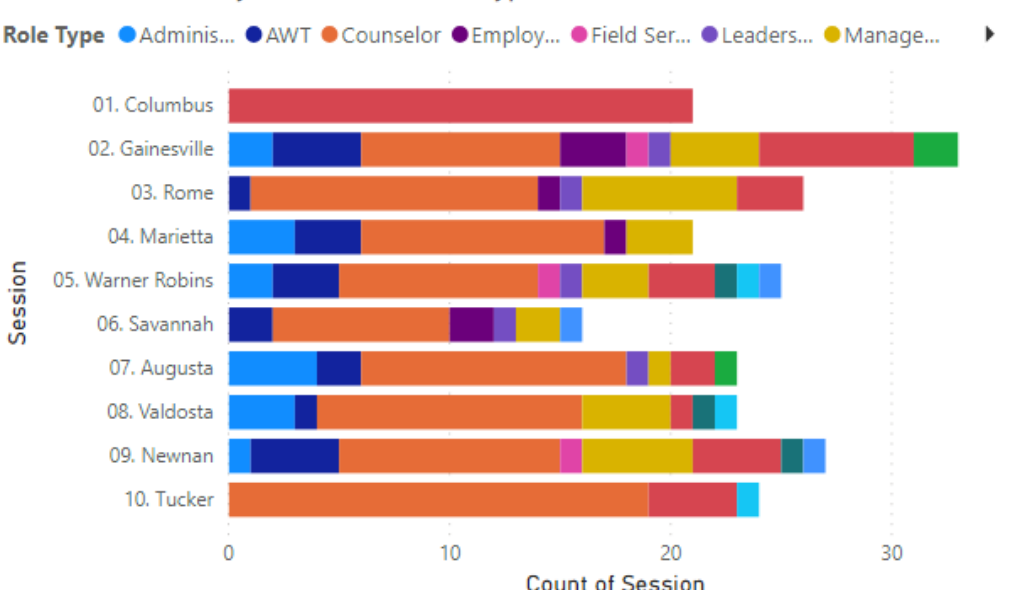


- Role Type
- ☐ (Blank)
  - ☐ Administrative Operations
  - ☐ AWT
  - ☐ Counselor
  - ☐ Employment Services
  - ☐ Field Services
  - ☐ Leadership
  - ☐ Management
  - ☐ Not Recorded
  - ☐ Other
  - ☐ Policy/Training
  - ☐ Provider Relations
  - ☐ Support Services

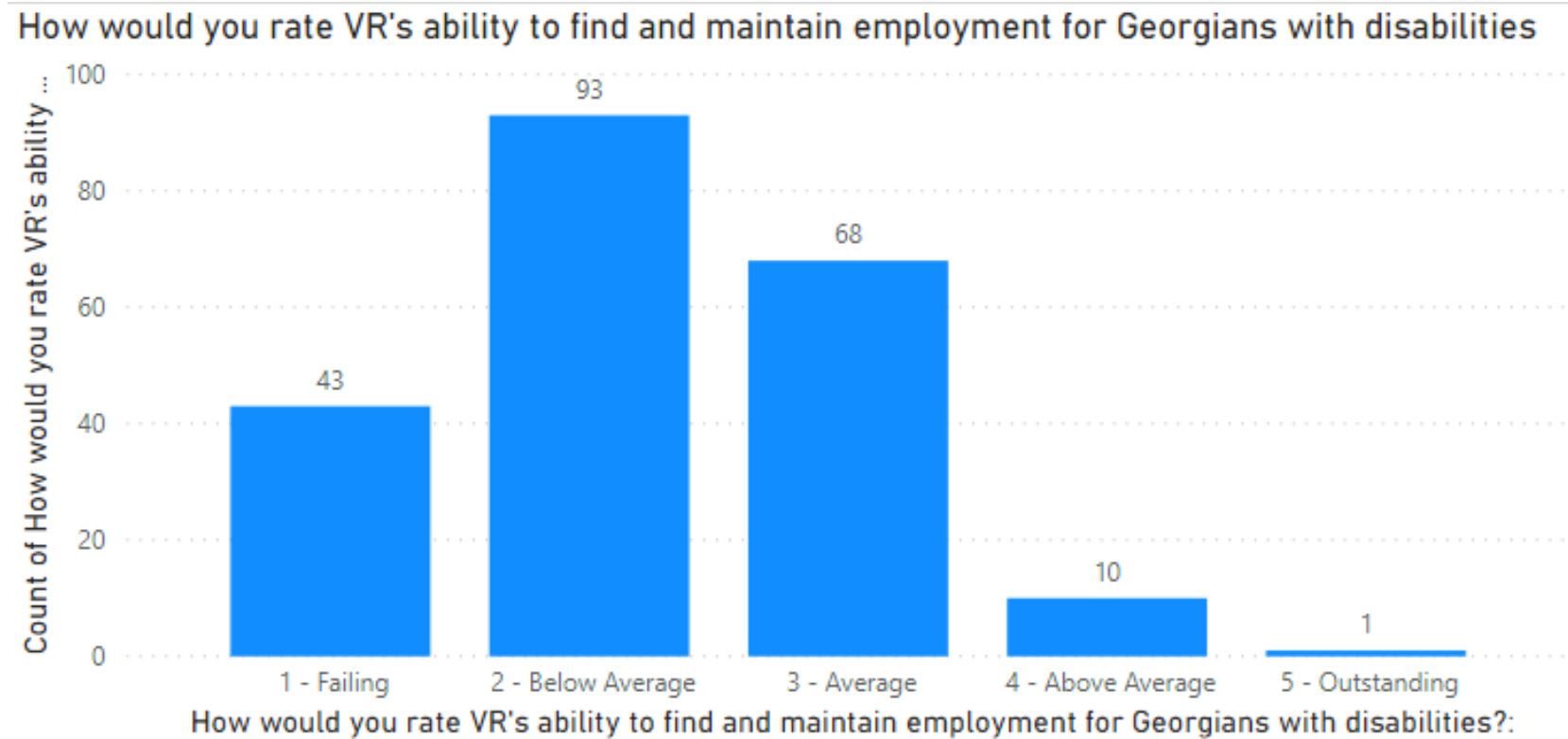
Count of Role Type by Role Type



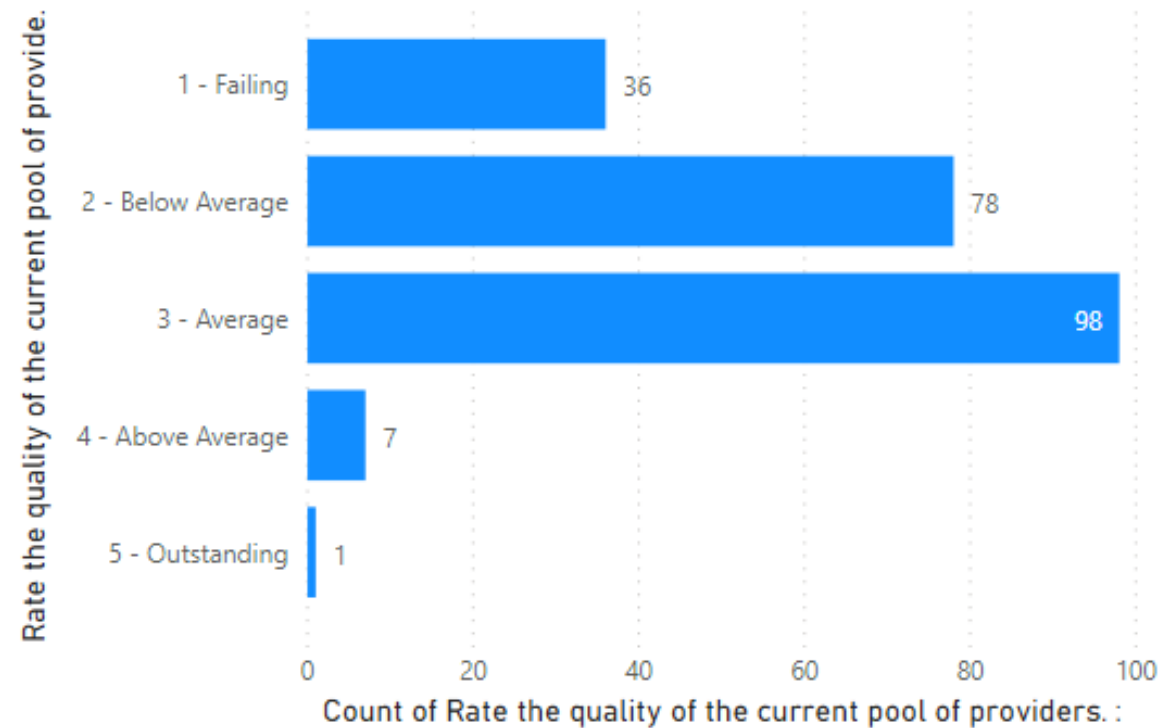
Count of Session by Session and Role Type



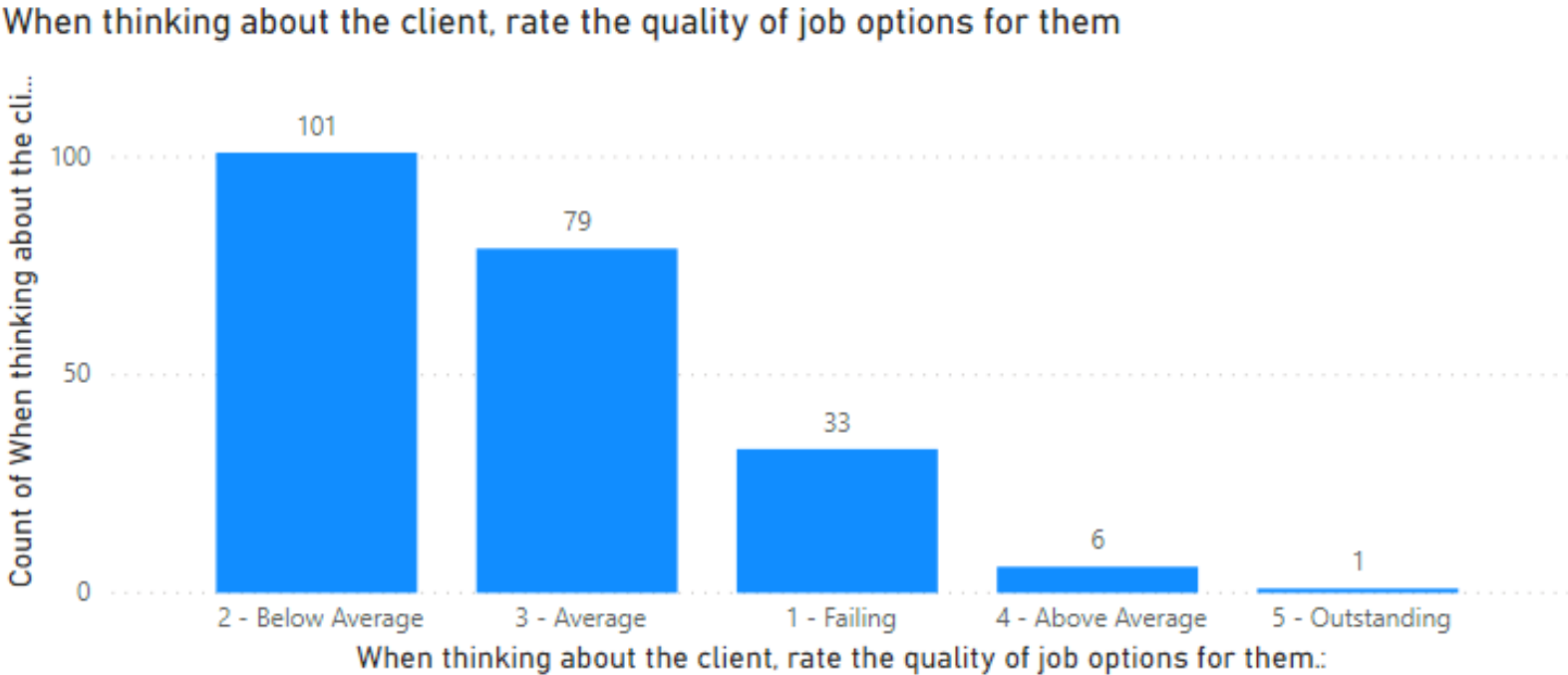
# POLL RESULTS: HOW DO YOU RATE VR'S ABILITY TO FULFILL ITS MISSION?



# POLL RESULTS: RATE THE QUALITY OF CURRENT POOL OF PROVIDERS



# POLL RESULTS: RATE THE QUALITY OF JOB OPTIONS FOR CLIENTS



# APPENDIX C

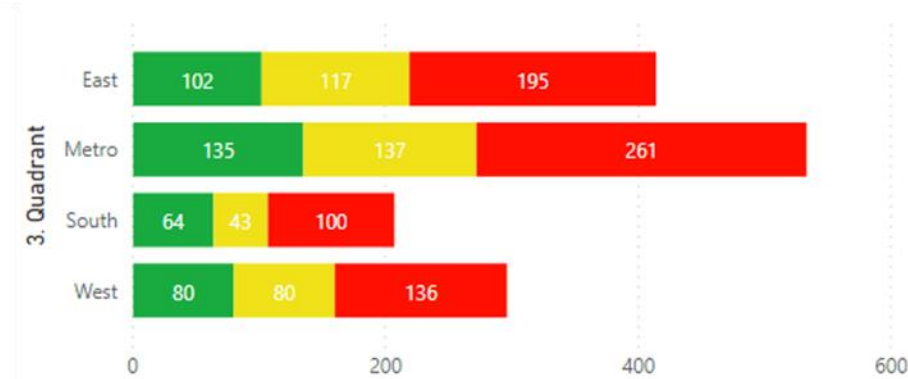
## FIELD OFFICE WORKSHOP SYNTHESIS

**GVRA**

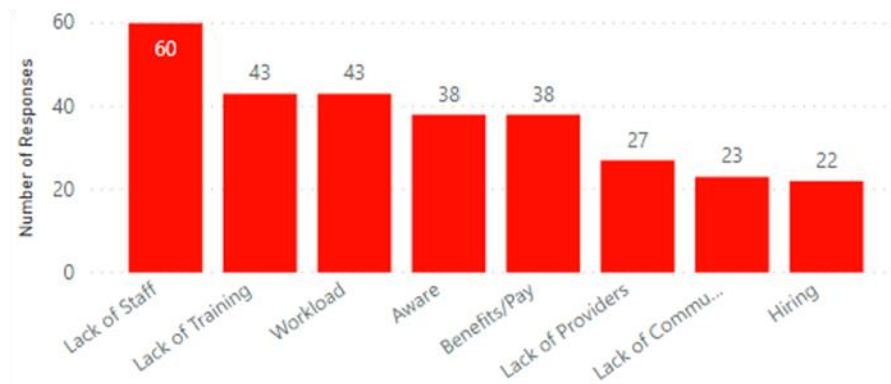


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# OVERALL WORKSHOP RESULTS FROM FIELD VISITS

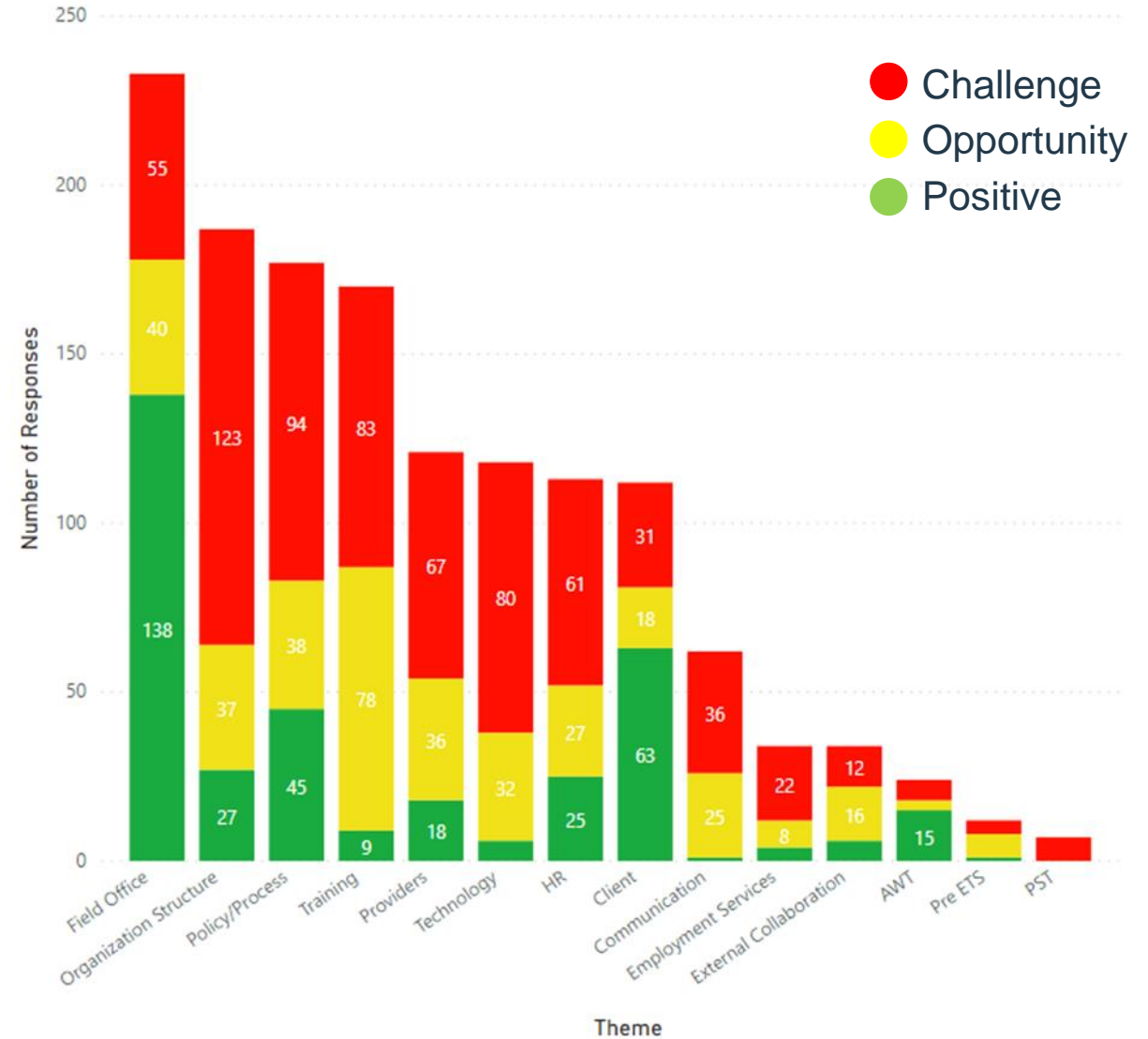


Total Responses Received



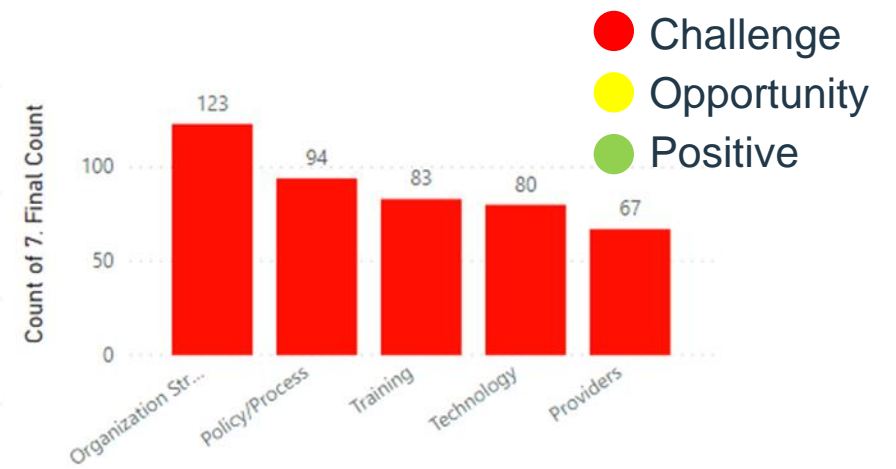
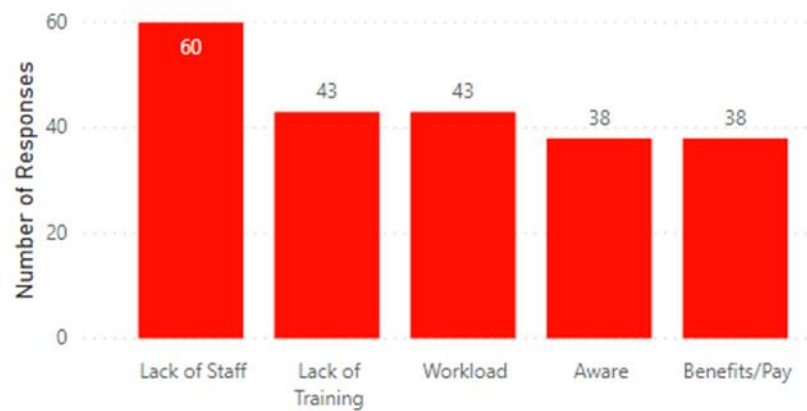
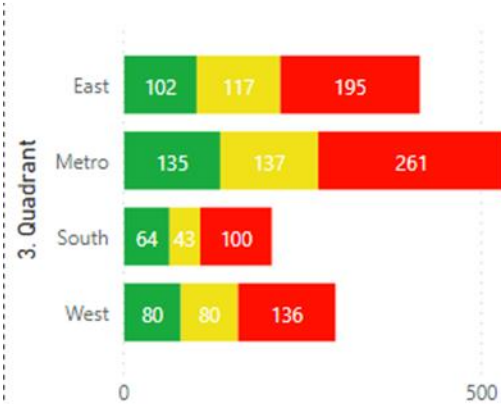
Total Number of Responses

1455

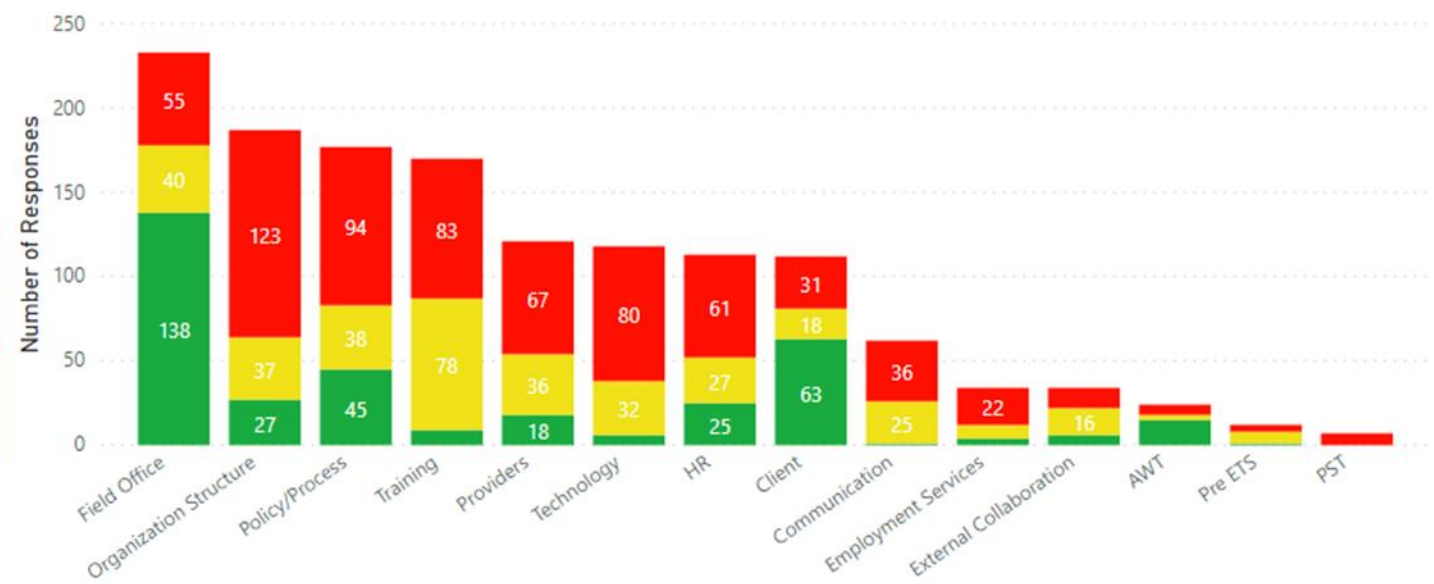
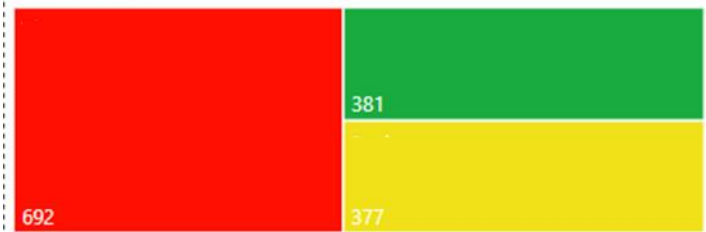


# OVERALL WORKSHOP RESULTS FROM FIELD VISITS

Total Geographically

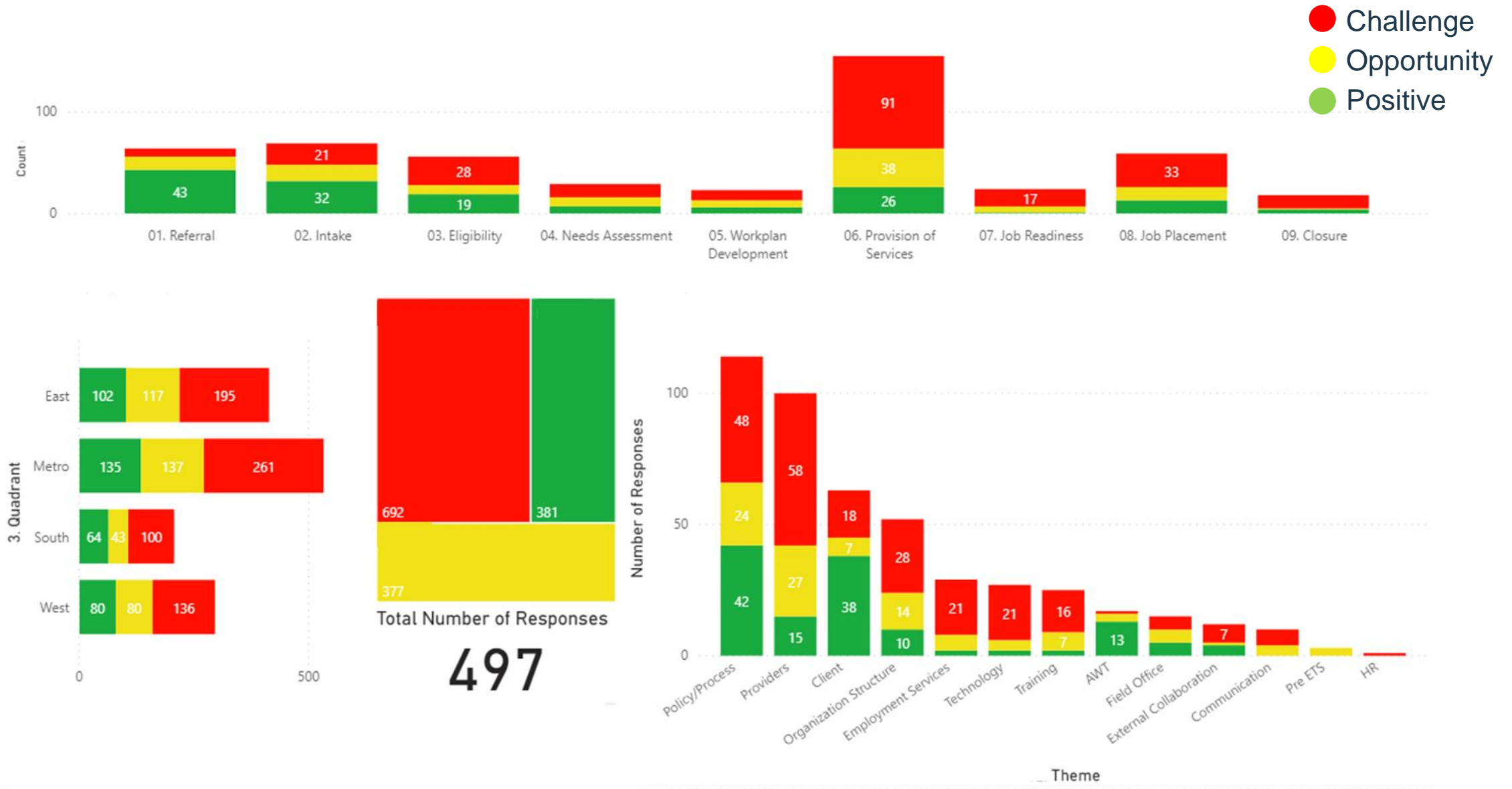


Total RBTs

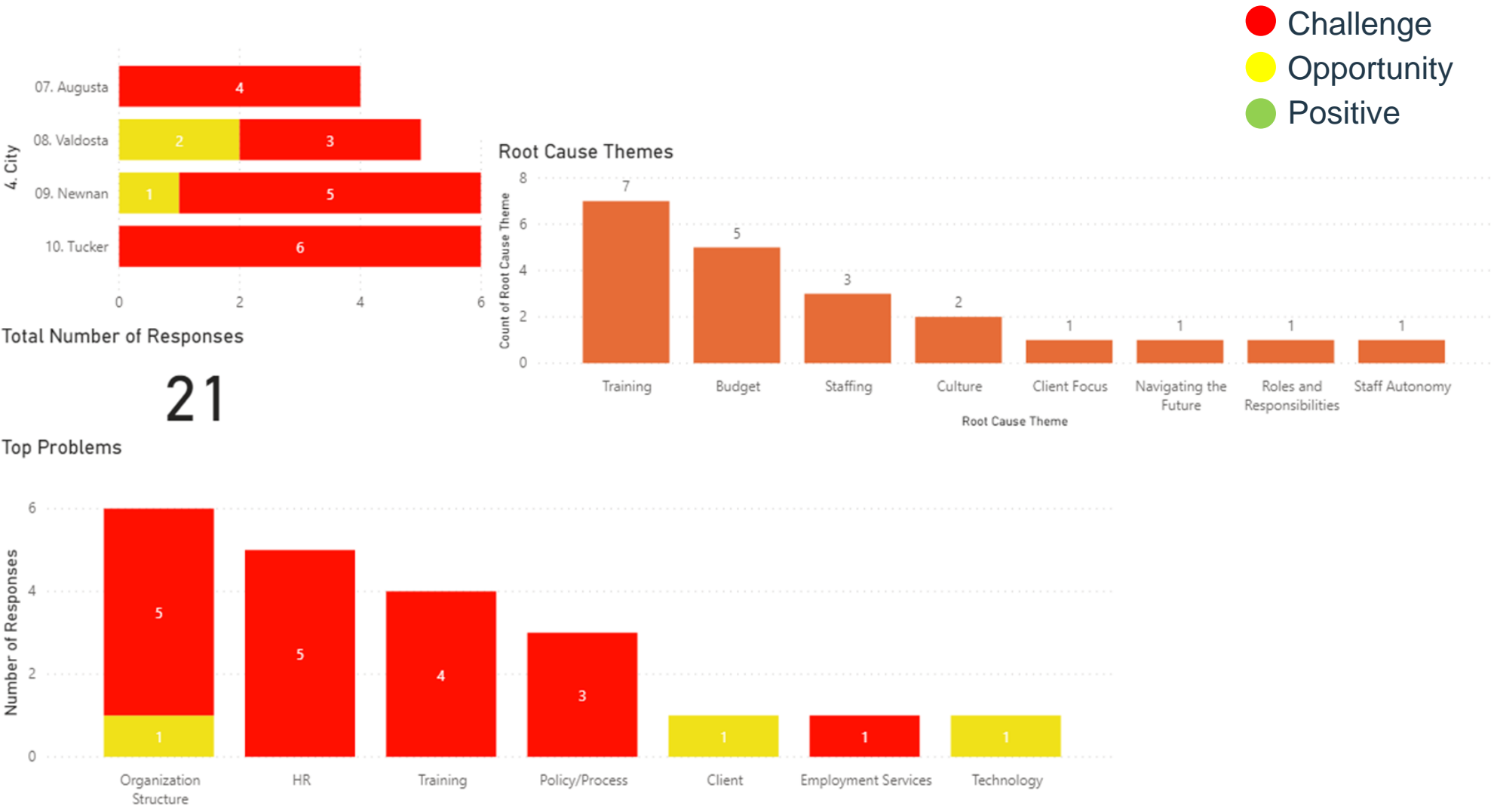




# FIELD VISIT FEEDBACK AGAINST THE VR PROCESS

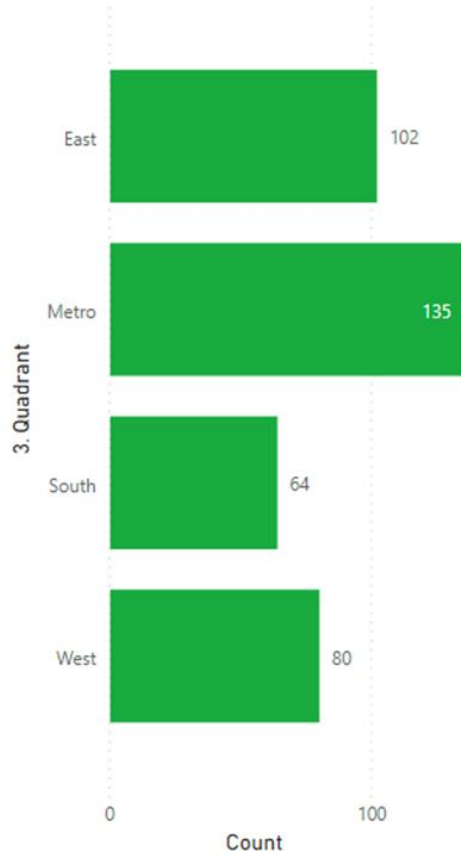


# FIELD VISIT FEEDBACK: TOP CONCERNS ABOUT VR FROM ROOT CAUSE GROUP EXERCISES

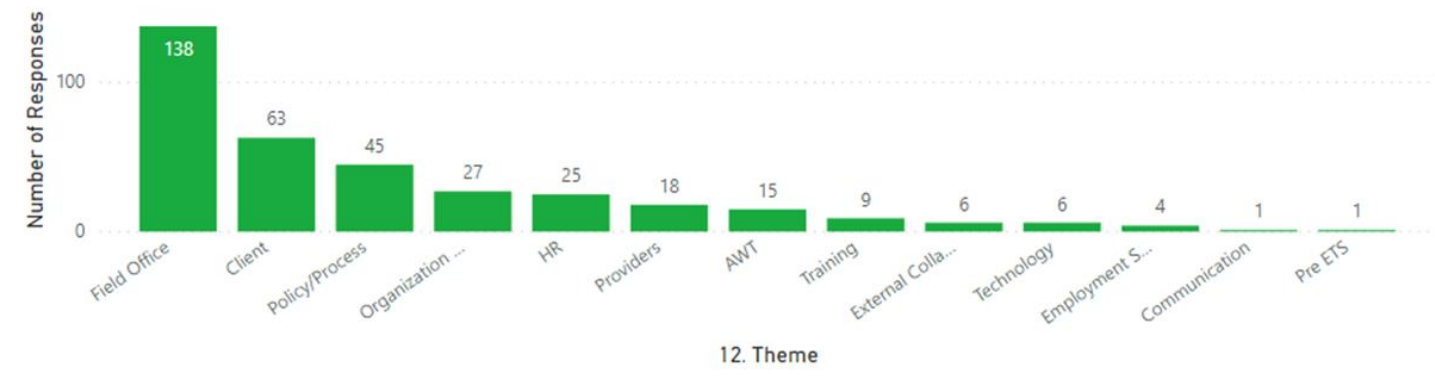
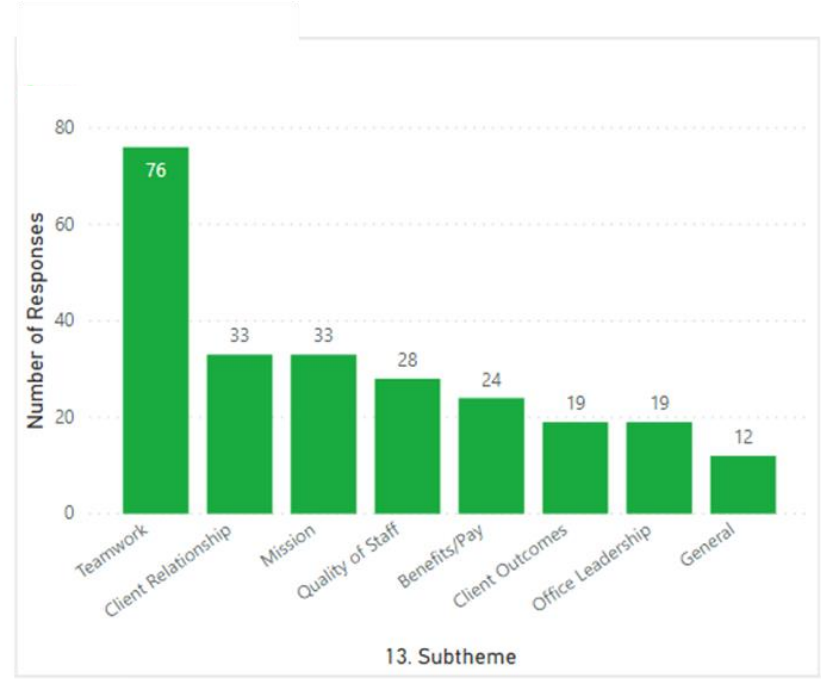


# FIELD VISIT FEEDBACK: TOP POSITIVE RESPONSES ON VR

- Challenge
- Opportunity
- Positive



381



# FIELD VISIT FEEDBACK: TOP OPPORTUNITIES FOR IMPROVEMENT AT VR



# APPENDIX D

## PROVIDER WORKSHOP SYNTHESIS

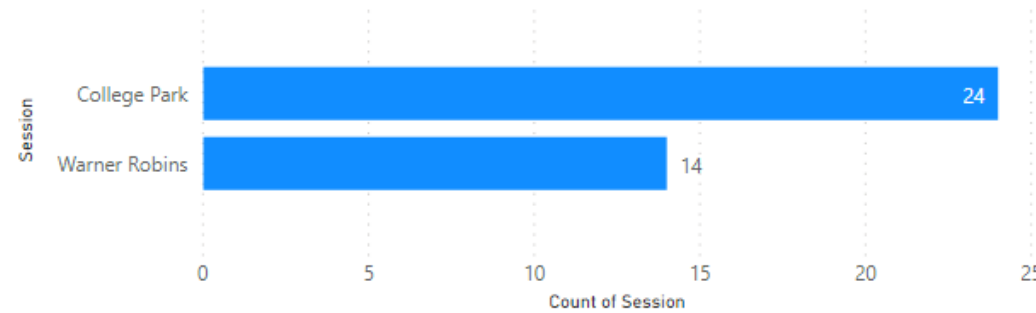
**GVRA**



GEORGIA VOCATIONAL  
REHABILITATION AGENCY

# PROVIDER WORKSHOP FEEDBACK

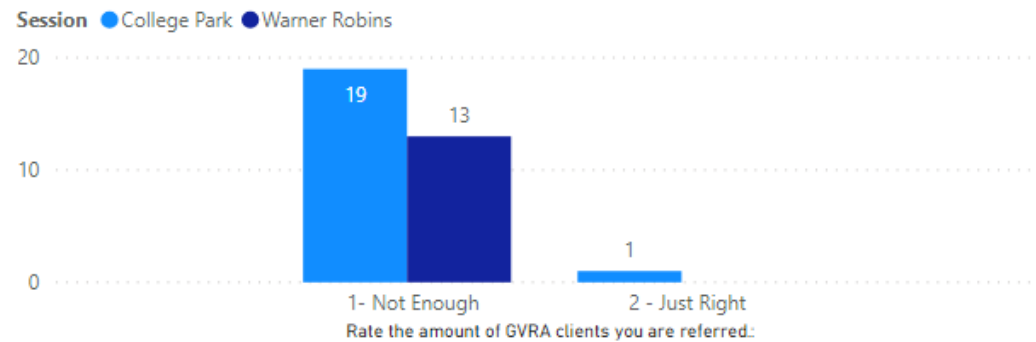
Participants per Workshop



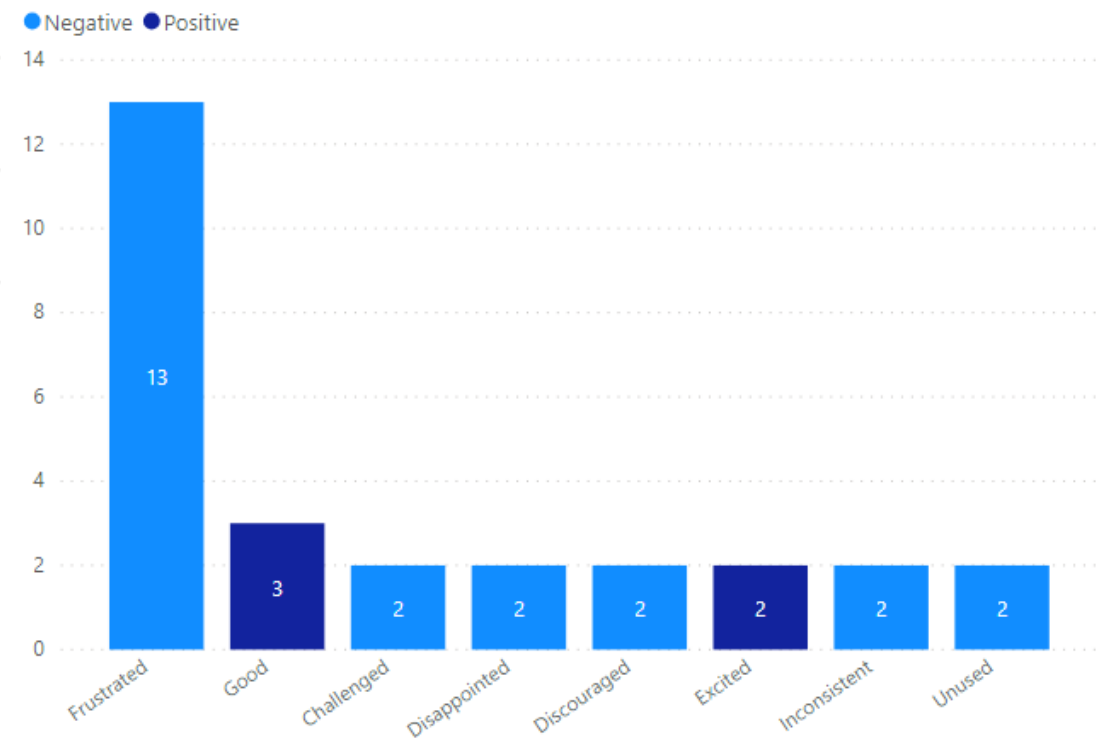
How many GVRA clients is your organization working with at a given time?



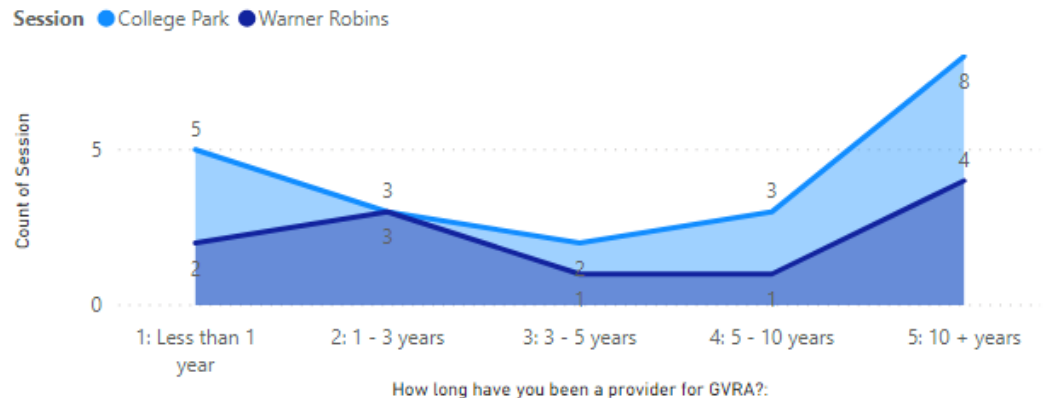
Rate the amount of GVRA clients you are referred



In one word, how do you feel working with GVRA? (Top 8)



How long have you been a provider for GVRA?

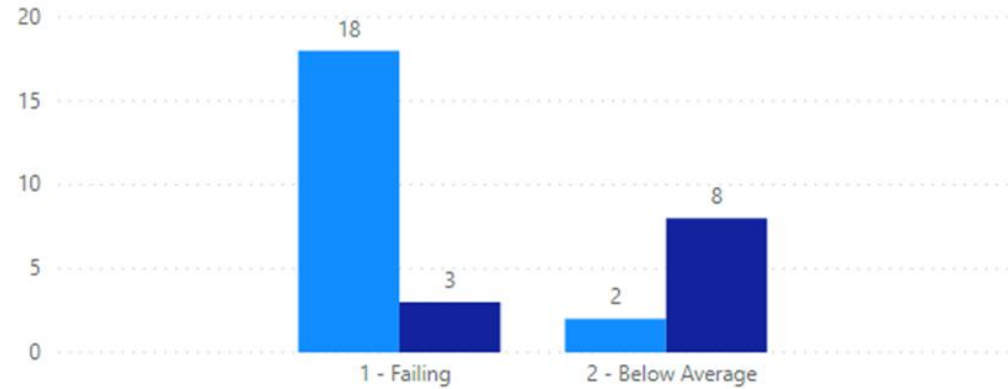


In one word, how do you feel working with GVRA?:

# PROVIDER WORKSHOP FEEDBACK ON WORKING WITH VR

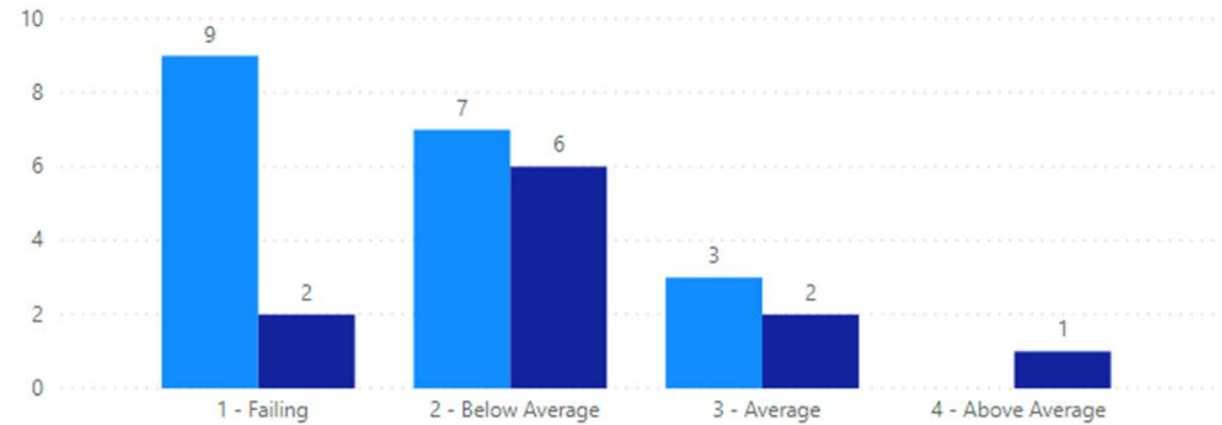
How would you rank GVRA's communication with policy changes, client information, etc.

Session ● College Park ● Warner Robins



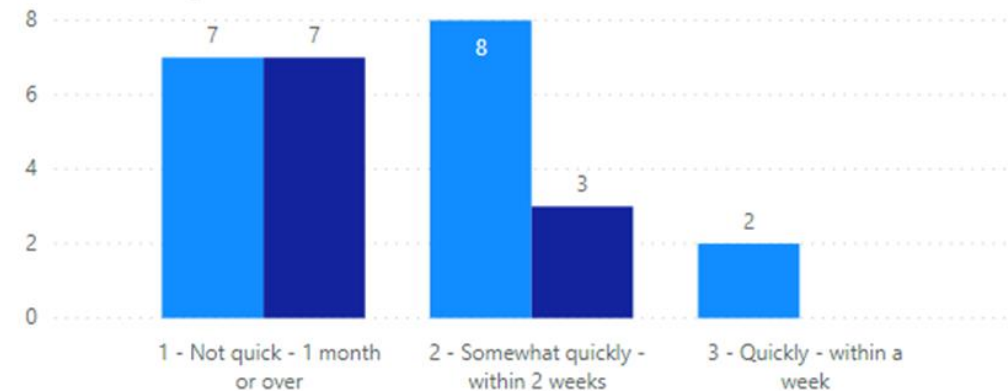
Rate the quality of resources (training, documentation, plans, etc.) provided by GVRA

Session ● College Park ● Warner Robins



How quickly are concerns/issues resolved when you escalate them to GVRA?

Session ● College Park ● Warner Robins

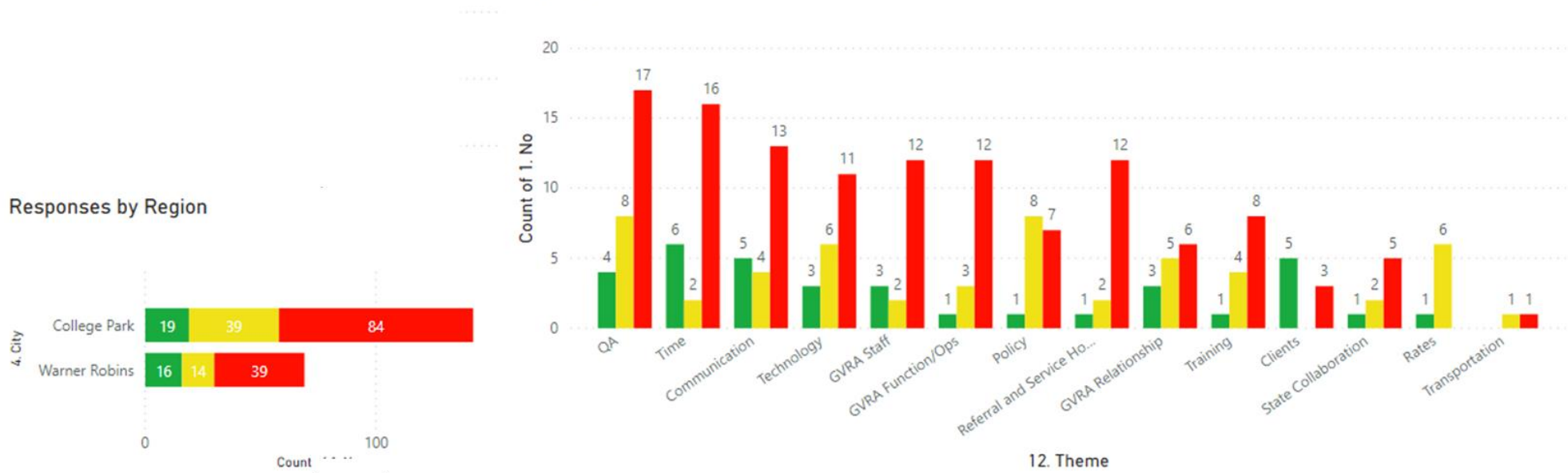




# PROVIDER WORKSHOP FEEDBACK AGAINST THE PROCESS THEY FOLLOW WITH VR



9. Process Step





# APPENDIX E

## ACCENTURE INSIGHTS PLATFORM

**GVRA**



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REHABILITATION AGENCY

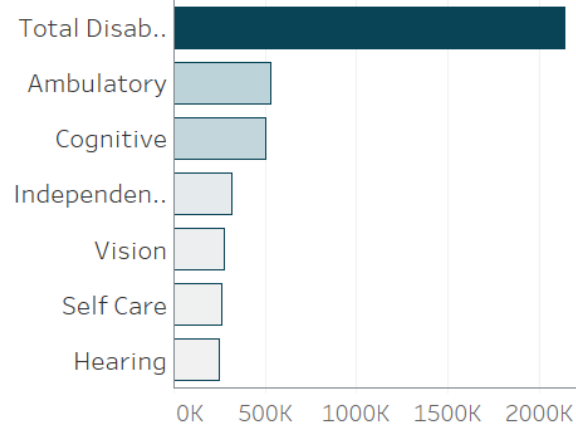


# GVRA | Executive Summary

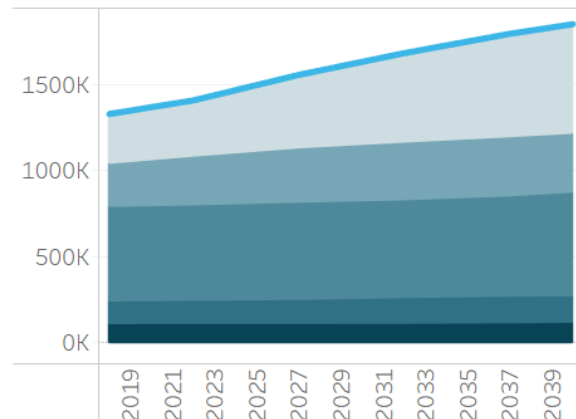


## Disability Population Summary

Projected Disability Population by Disability Type, 2025  
(Age Less Than 65)



## Total Disability Population



## Employment Statistics..

Employment/Population Ratio **32.5%**

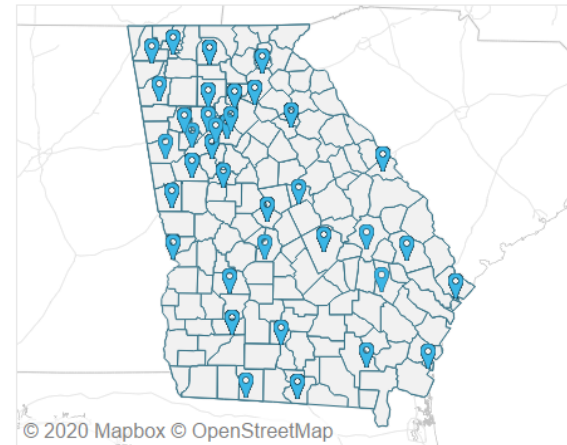
Labor Force Participation **38.7%**

Unemployment Rate **15.7%**

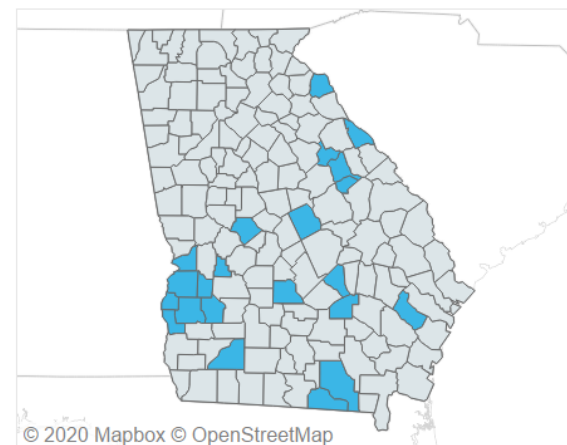
Working Age Population (Age 16+) **#####**

## GVRA Offices in Georgia

GVRA Office Locations



Counties **Not Being Served** by a GVRA Office



## Client Summary

Number of Clients Employed

Number of Employed Client.. **1,131**

Average Age **34.3**

Number of Clients Awaiting Placement

Number of Clients Waiting.. **926**

Average Age **39.4**

Number of Cases Closed

Number of Closed Rehabilitation Cases in.. **1,793**

Costs and Benefits, SFY 2019

Total Administrative.. **\$7,995,197**

Reduction in Public.. **-\$8,456,886**



# GVRA | Demographic Characteristics



Georgia

Total Population

10,012,994

Disability Population

1,237,621

Population Without Disability

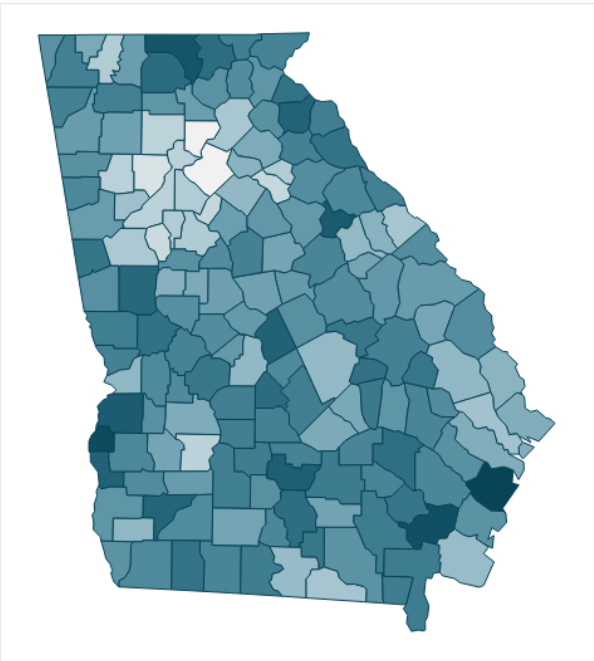
8,775,373

Prevalence of Disability

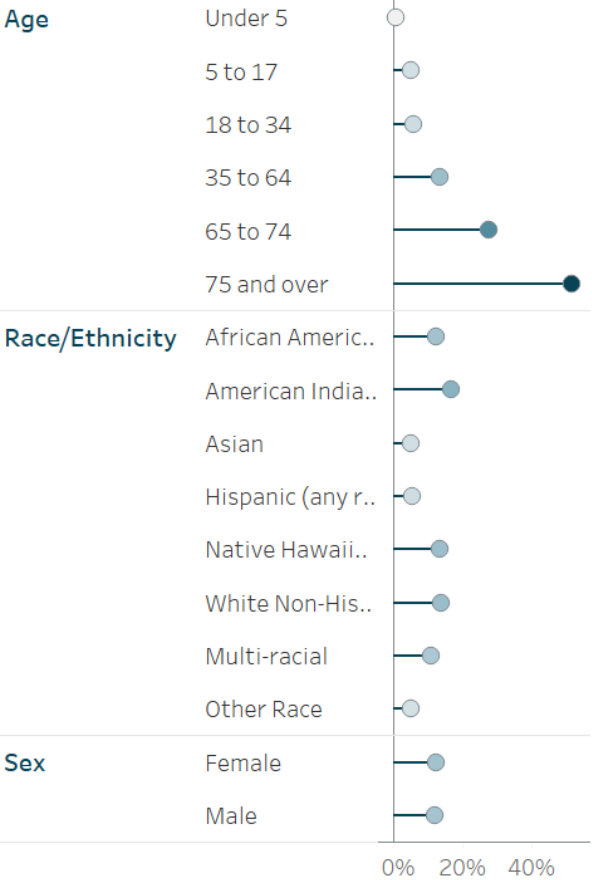
12.4%

Prevalence of Disability

By County

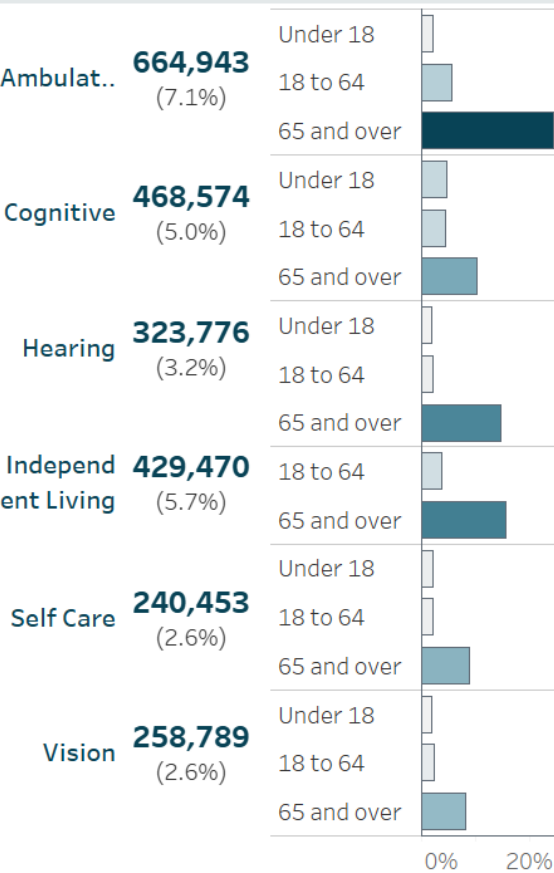


By Age, Race/Ethnicity and Sex

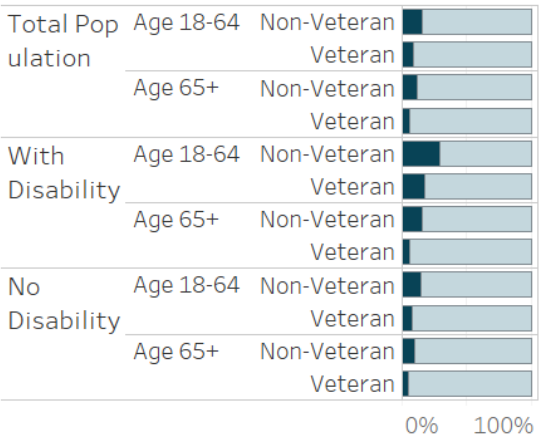


Disability Prevalence by Disability Type and Age

Age Det.  
☒ L...  
☐ M...



Poverty by Disability Status, ...





# GVRA | Employment Statistics



Georgia

Employment/Population Ratio

32.5%

Labor Force Participation

38.7%

Unemployment Rate

15.6%

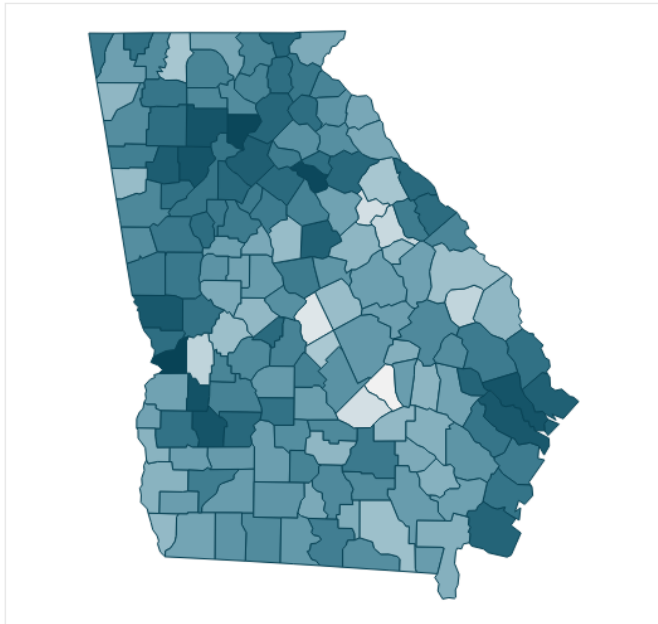
Working Age Population (Age 16+)

654,635

## ☒ Labor Force Participation

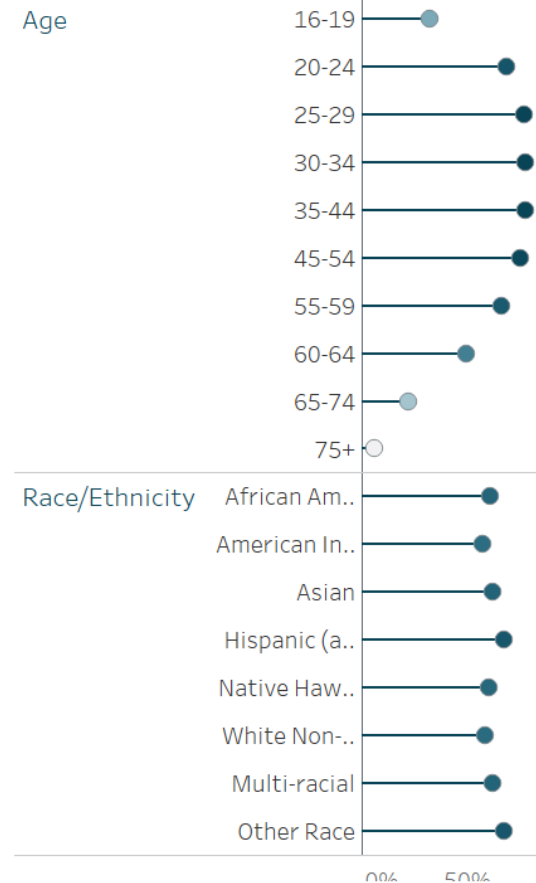
☒ Disability Population

☒ By County

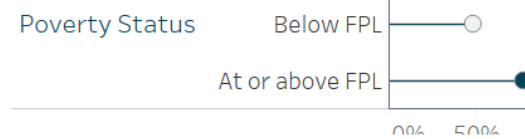


Low High

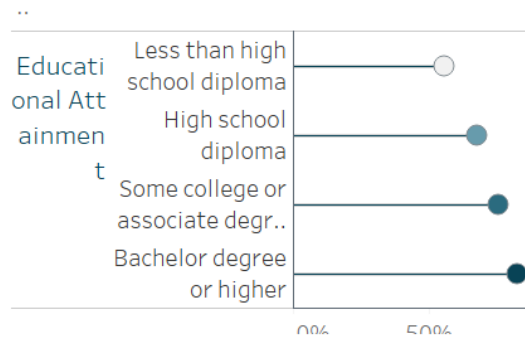
### By Age and Race/Ethnicity (Total P..



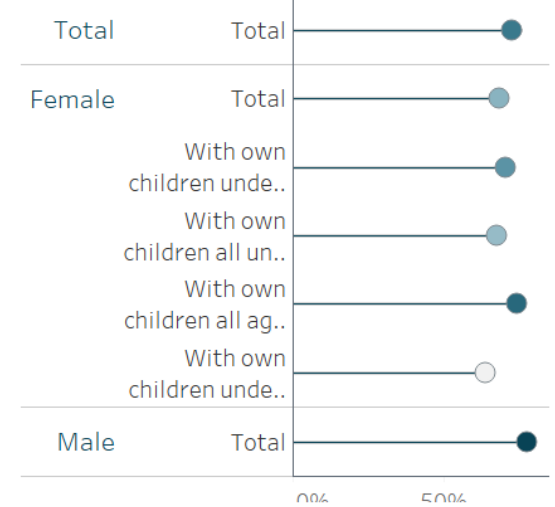
### By Poverty Status (Total Population..



### By Educational Attainment



### By Gender (Total Population Age 2..





# GVRA | Projected Disability Population



Georgia

Overall Disability Prevalence

1,348,506

Ambulatory

808,922

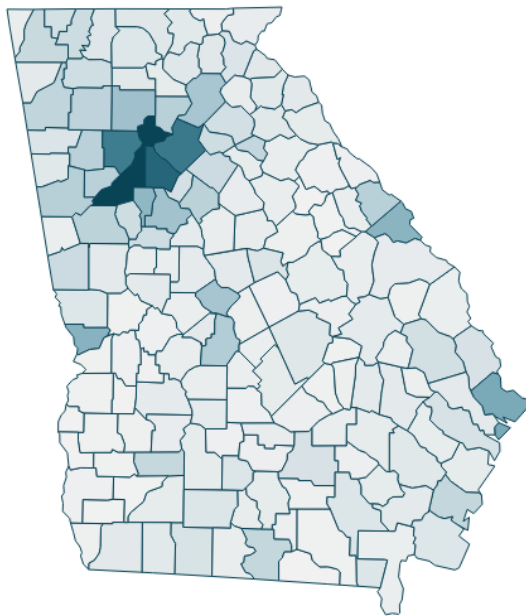
Independent Living

500,443

## Projected Disability Population By Disability Type

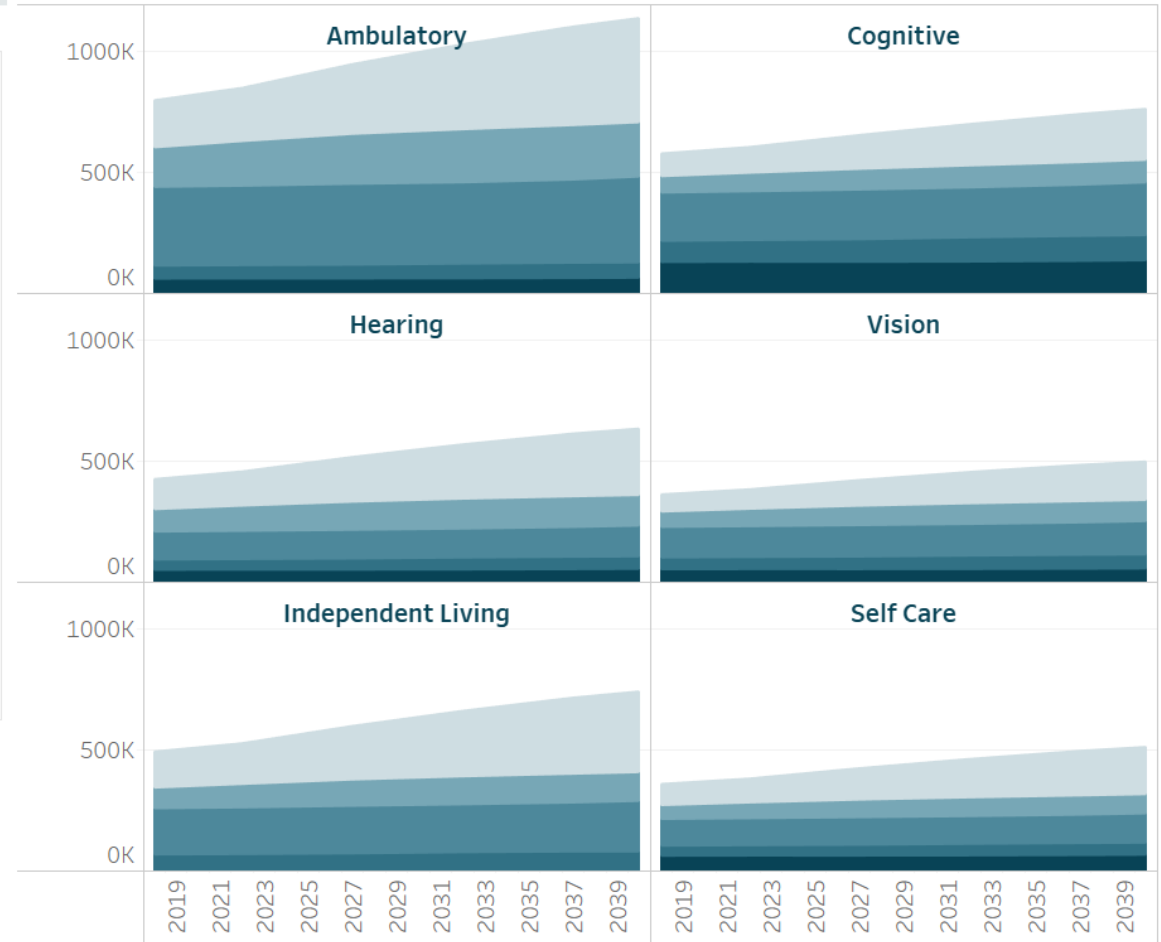
☒ Disability Overall

☒ By Year 2019



Low High

## Projected Disability Population By Age





# GVRA | Office Locations



Georgia

Number of Clients Waiting For Placement

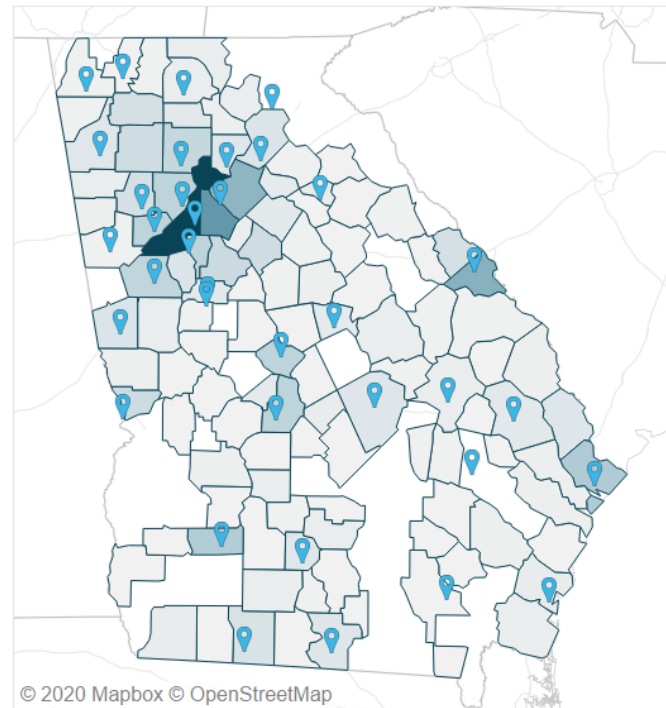
926

Average Age

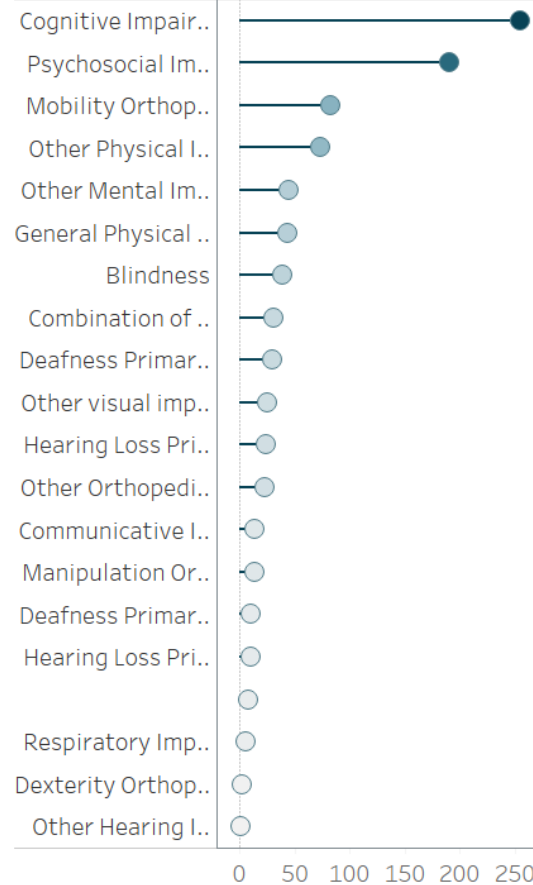
39.4

## Number of Clients Waiting for Placement By Office

☒ Clients Waiting for .. ☒ Include Age 65+



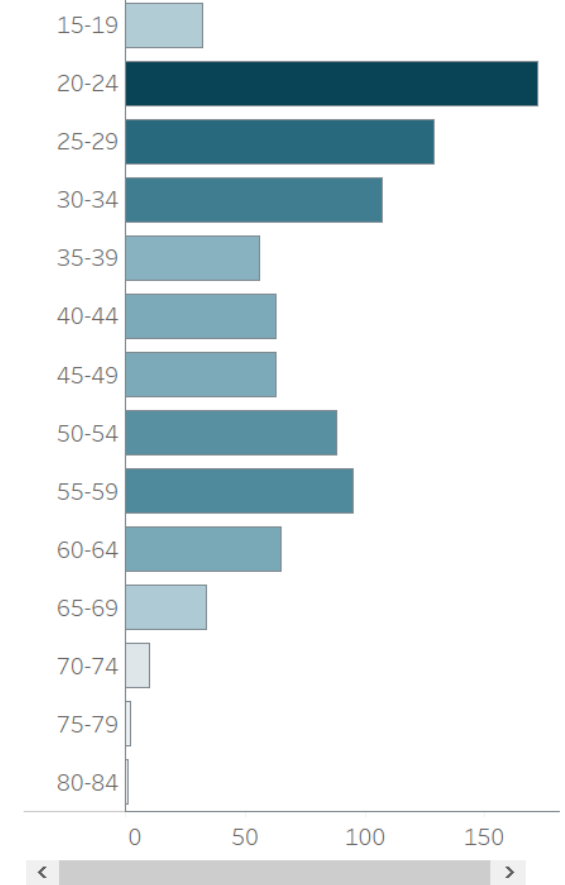
## Clients by Most Common Disability Types



## Top 20 Employment Goals



## Clients Waiting for Placement By Age







# GVRA | Office Locations



Georgia



Disability Population

2,772,867

Counties in Geographic Service Ar..

168

Number of Clients

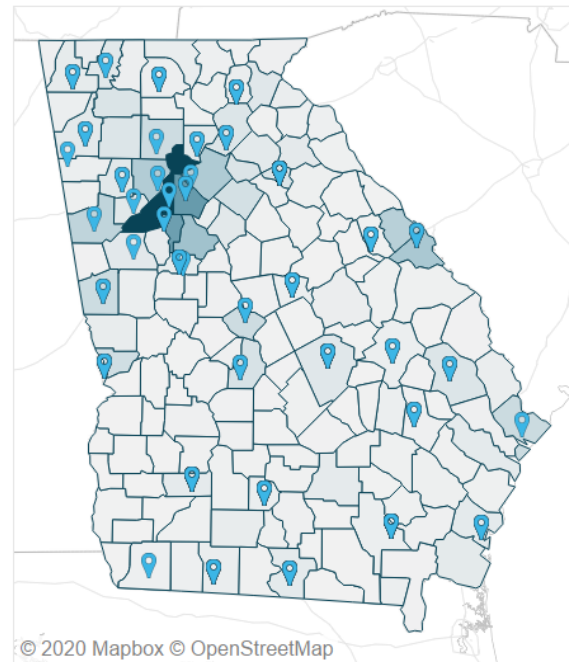
1,956

# of Clients for Office Client

2,032

## Projected Disability Populatio..

☒ Disabilit.. ☒ 2019.. ☒ Include ..



## Disability Population by Lo..

Total Disability Population

Ambulatory

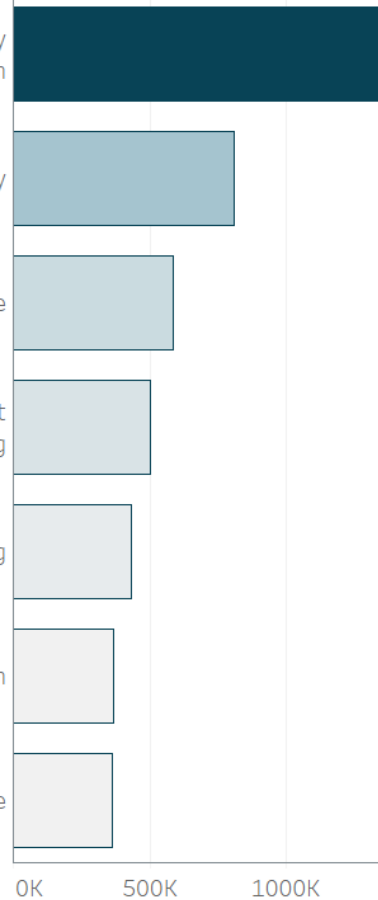
Cognitive

Independent Living

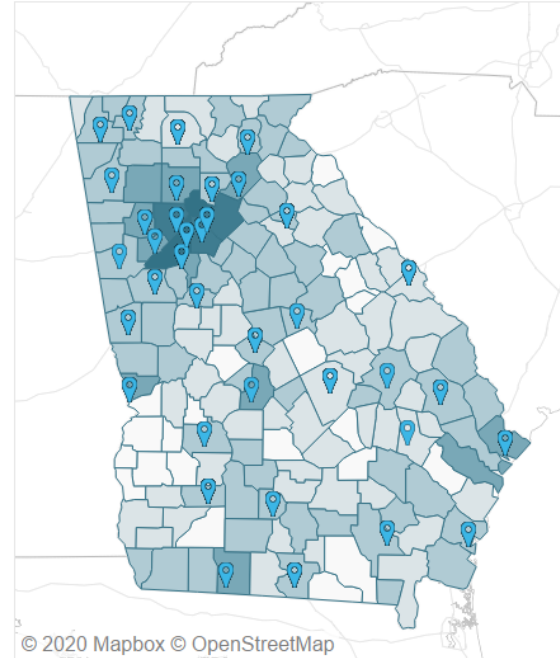
Hearing

Vision

Self Care



## Relationship Between Offic..

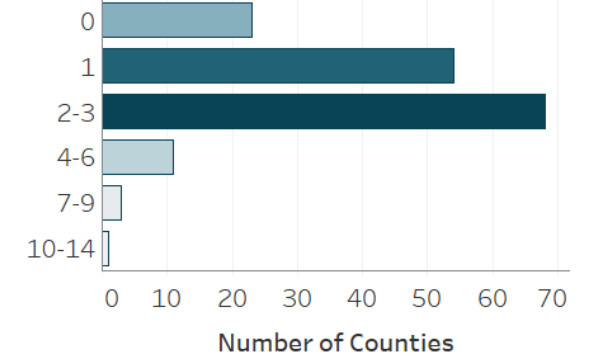


© 2020 Mapbox © OpenStreetMap

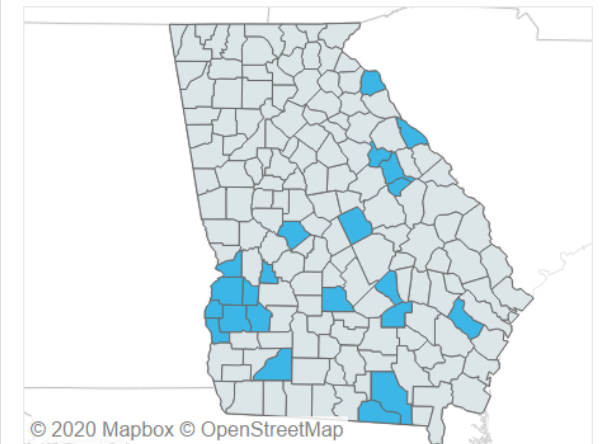
Number of Offices Serving County

- 0
- 1
- 2-3
- 4-6
- 7-9
- 10-14

## Number of Offices Serving Ea..



Counties Being Served by No GVRA Offices



© 2020 Mapbox © OpenStreetMap



# GVRA | Office Locations



Georgia



Total Clients

2,032

CRCs

84

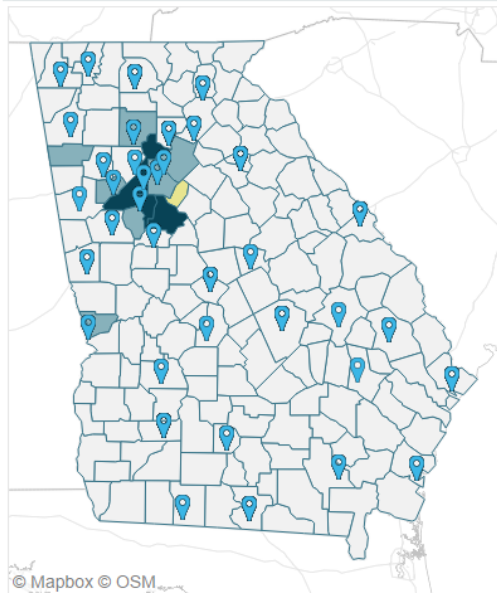
Total FTEs

429

Number of Closed Rehabilitation ..

1,793

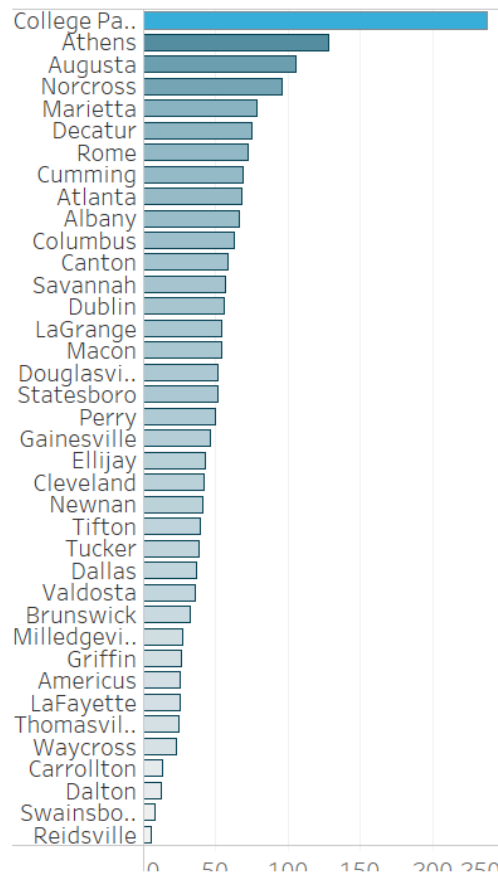
## Relationship Between Office Locations and Cl..



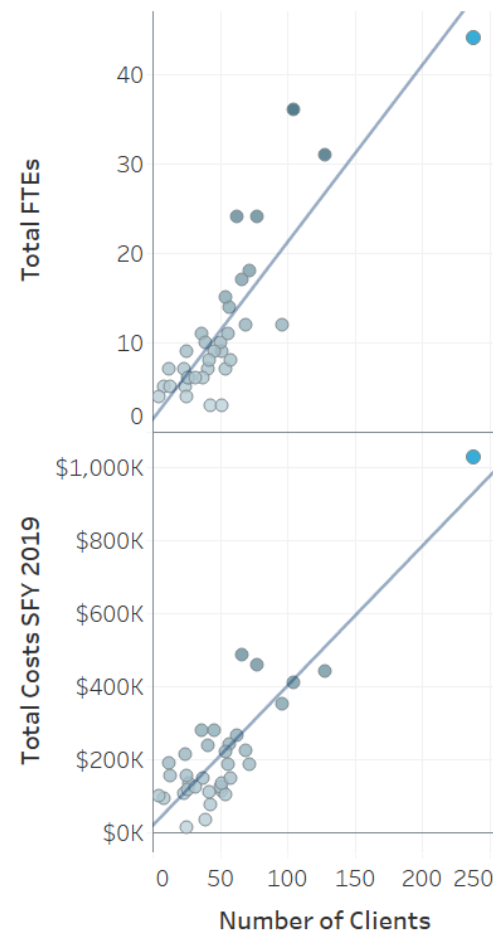
- Clients in Geographic Service Area
- Clients Out of Geographic Service Area
- No Clients in Geographic Service Area Co..
- No Clients, Out of Geographic Service Area

## Total Clients by Office

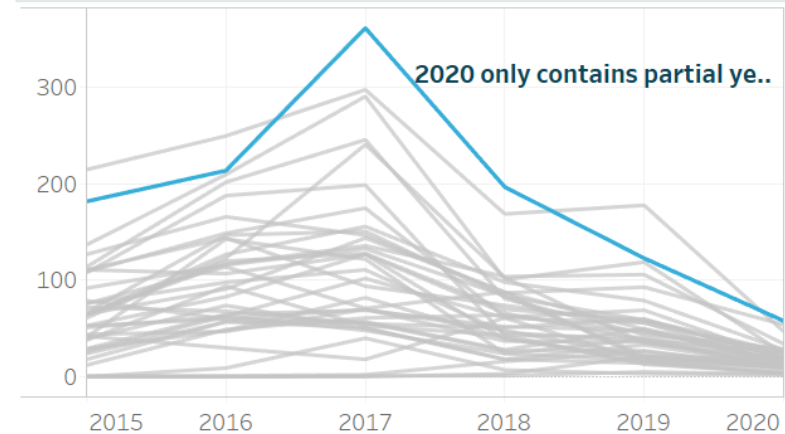
- ☒ Include Age 65+
- ☒ All Disability Types



## Clients by Office FTEs and..



## Number of Closed Rehabilitation Cases b..



## Cases Closed Where Outcome is Other Than Rehabilitated: All Offices

Closure Reason	2015	2016	2017	2018	2019	2020
All Other	###	###	###	###	###	733
Unable to Locate/Contact	###	###	###	###	###	###
Refused Services	2	1	3	215	###	###
Failure to Cooperate	66	117	175	147	877	351
No Impediment to Employme..	99	80	50	51	23	5
Does Not Require VR Services	44	66	3	38	175	66
No Impairment	54	50	63	33	34	10
Transferred to Another Agen..	44	50	58	8	49	22
Transportation Not Feasible/..	56	36	53	31	28	17
Death	20	25	54	1	25	5
Disability Too Significant to ..	20	16	34	4	20	8
Institutionalized (Not Jail or ..	2			5	10	6
Extended Employment				4	15	
Grand Total	###	###	###	###	###	###





## GVRA | Impact on Public Assistance



-79.4%

## Change in Public Assistance Needed From Intake to Closure

\$1..

● Assistance Type

Closure \$0.80M

\$1..

\$1..

40

\$9..

\$8..

\$7

\$6..

\$5..

\$4

ψ...

\$3..

\$2..

41

\$1..

\$0

\$0..

ProjP

SSI Disabled

SSDI Other

Other

VA

SSI Disabled

# APPENDIX F

## ORGANIZATIONAL STRUCTURE ANALYSIS

**GVRA**



GEORGIA VOCATIONAL  
REHABILITATION AGENCY

# CURRENT STATE OFFICE FACT DEFINITIONS

Metric	Source	Definition
Vacancy Rate: Total vacancies/total positions with vacancies	Org Chart	Shows vacancy as a percentage to compare offices.
Manager Ratio:	Org Chart	Manager: Staff as is currently.
Manager Ratio (With Vacancies):	Org Chart	Manager: Staff including vacancies.
Total Disability Population in Geographic Service Area:	Census – 5 year estimate from 2013-2017	Total Disability Population in the geographic area of the office.
Total Open Cases:	Field Services Report – pulled 8/2019	Total open cases for the office.
Closed Cases:	Field Services Report – pulled 8/2019	Total successfully closed cases for the office.
Job Ready Waiting %: Service J/Total Open Cases	Field Services Report – pulled 8/2019	Job ready clients as a percentage of total open cases.
Closed Case %: Closed Cases/Total Open Cases	GVRA Employed Report – pulled 8/2019	Total successfully closed cases as a percentage of total open cases.
Total Admin Costs SFY 2019:	VR Expenditures SFY 2019	Total admin costs SFY 2019
Total Travel Costs SFY 2019:	VR Expenditures SFY 2019	Total travel costs SFY 2019
Percent of disability population served	Field Services Report – pulled 8/2019	Number of open cases out of the total disability population as a percent

# CURRENT STATE OFFICE FACTS

**Vacancy Rate= # of vacancies/total positions with vacancies**

Office	Vacancy Rate	Office	Vacancy Rate
Dallas	70	Rome	25
Carrollton	57.1	Norcross	25
Griffin	57.1	Columbus	23.5
Thomasville	55.5	College Park Total	22.6
Americus	50	Waycross	22.2
Milledgeville	50	Dalton	22.2
Savannah	47	Statesboro	22.2
Merietta	46.2	Dublin	21.4
Cleveland	41.7	Albany	21
Gainesville	40	Swainsboro	20
DeKalb/Tucker	38.7	Augusta	19.2
Douglasville	37.5	Tifton	11.1
Macon	37.5	Newnan	8.3
Athens	32.1	Canton	0
Cumming	30.8	Valdosta	0
Ellijay	28.6	Perry	0
LaFayette	27.3	Reidsville	0
Brunswick	25		
LaGrange	25		

**Total Open Cases Per Office**

Office	Total Open Cases	Office	Total Open Cases
College Park Total	1,948	Valdosta	353
Merietta	1,291	Columbus	349
Augusta	1,185	Ellijay	305
Norcross	1,143	LaGrange	294
Athens	1,028	Newnan	282
Macon	812	Douglasville	273
Cumming	741	Statesboro	264
Albany	680	Dalton	257
Rome	679	Tifton	246
Canton	670	Waycross	215
Gainesville	593	Griffin	190
Dublin	516	Americus	190
Dallas	442	Brunswick	184
Perry	438	Carrollton	182
Cleveland	419	Milledgeville	165
LaFayette	413	Reidsville	108
DeKalb/Tucker	411	Swainsboro	78
Thomasville	373		
Savannah	361		

# CURRENT STATE OFFICE FACTS

**Closed Case % = # of closed cases/Total open cases**

Office	Closed Case %
Columbus	34.1
Brunswick	26.1
Milledgeville	23.6
Douglasville	18.3
Dublin	18
Statesboro	17.4
Savannah	15.5
Tifton	14.6
Cumming	14.3
Merietta	13.8
Cleveland	13.4
LaGrange	12.9
Waycross	12.1
Albany	11.6
Carrollton	11.5
Newnan	9.6
Griffin	9.5
Canton	9
LaFayette	9

Office	Closed Case %
Athens	9
Americus	8.9
Gainesville	8.3
Perry	7.5
Ellijay	6.9
Rome	6.5
Swainsboro	6.4
College Park Total	6.3
Valdosta	6.2
Augusta	5.8
Norcross	5.2
Dalton	5.1
Macon	5
Dallas	4.5
DeKalb/Tucker	4.1
Thomasville	3.8
Reidsville	2.7

**Job Ready Waiting % = # of Service J Clients/Total open cases**

Office	Job Ready Waiting %
Milledgeville	17.6
Savannah	15.5
Albany	15.3
Columbus	14
Statesboro	11.4
College Park Total	11.1
Dublin	11
Augusta	10.3
Perry	9.8
Griffin	8.9
Newnan	8.9
Reidsville	8.3
Ellijay	7.9
Brunswick	7.6
Tifton	7.3
Thomasville	7.2
Athens	7.1
LaGrange	7.1
Douglasville	7

Office	Job Ready Waiting %
Cumming	6.9
Americus	6.8
Rome	6.8
DeKalb/Tucker	6.3
Valdosta	6.2
Norcross	5.2
Swainsboro	5.1
Dallas	4.8
LaFayette	4.8
Canton	4
Macon	3.9
Dalton	3.9
Carrollton	3.3
Gainesville	3
Waycross	2.3
Merietta	2.1
Cleveland	0.7

# CURRENT STATE OFFICE FACTS

## Total Admin Costs SFY 2019

Office	Total Admin Costs SFY 2019	Office	Total Admin Costs SFY 2019
College Park Total	962,898	Dallas	134,551
Albany	476,724	Canton	133,814
Merietta	442,280	LaFayette	132,466
Athens	422,220	Milledgeville	128,756
Augusta	387,099	Douglasville	128,143
Norcross	339,756	Perry	115,525
DeKalb/Tucker	335,953	Griffin	111,535
Gainesville	273,103	Brunswick	108,617
Valdosta	270,894	Waycross	103,093
Columbus	243,357	Statesboro	96,633
Savannah	236,219	LaGrange	92,234
Newnan	222,958	Reidsville	90,954
Cumming	215,766	Cleveland	89,960
Macon	209,472	Swainsboro	84,033
Thomasville	202,912	Ellijay	69,855
Rome	171,979	Tifton	22,729
Dublin	169,257	Americus	8,586
Dalton	154,199		
Carrollton	153,289		

## Total Travel Costs SFY 2019

Office	Total Travel Costs SFY 2019	Office	Total Travel Costs SFY 2019
College Park Total	63,628	Albany	9,127
Dalton	34,743	Thomasville	9,054
Augusta	22,384	Swainsboro	8,933
LaFayette	20,601	Reidsville	8,631
Columbus	19,861	LaGrange	8,620
Athens	19,005	Perry	7,140
Cleveland	18,568	Cumming	6,946
Statesboro	16,435	Valdosta	5,749
Merietta	16,124	Griffin	5,524
Dublin	15,763	Gainesville	5,409
Rome	13,825	Douglasville	5,041
Brunswick	13,473	Ellijay	4,958
Newnan	12,545	Savannah	4,392
Canton	12,031	Milledgeville	4,090
Tifton	11,963	Waycross	2,833
Dallas	10,933	Americus	2,681
Macon	10,782	Carrollton	1,853
DeKalb/Tucker	9,976		
Norcross	9,757		

# APPENDIX G

## TRAINING

**GVRA**



GEORGIA VOCATIONAL  
REHABILITATION AGENCY

# TRAINING DELIVERY METHODS & TECHNIQUES

We recommend VR consider the following factors when choosing a training delivery method:

	Instructor-Led Training (ILT)	Expert-Led Training	e-Learning - self-study web-based training	Virtual ILT (GoToMeeting / Microsoft Teams)	Simulations / Demos
Advantages	<ul style="list-style-type: none"> <li>Allows for high degree of collaboration and interaction</li> <li>Instructor can “read” audience</li> <li>Support available in classroom</li> </ul>	<ul style="list-style-type: none"> <li>Good for small groups of learners</li> </ul>	<ul style="list-style-type: none"> <li>Employees can take when/where they want</li> <li>No travel required</li> <li>Log attendance (LMS dependent)</li> <li>Can build in assessments</li> </ul>	<ul style="list-style-type: none"> <li>Allows for “1 to many” delivery</li> <li>No travel required</li> <li>Ability to respond to questions (dependent on # participants)</li> </ul>	<ul style="list-style-type: none"> <li>Simulates real life scenarios</li> </ul>
Primary Considerations	<ul style="list-style-type: none"> <li>Limited classroom size, and dependency on room availability</li> <li>Travel cost and time from job</li> <li>Heavy resource load for trainers</li> </ul>	<ul style="list-style-type: none"> <li>High effort; only feasible for very specific audiences</li> <li>Cost associated if external trainer used</li> </ul>	<ul style="list-style-type: none"> <li>Difficult for client-facing staff in the field</li> <li>Expensive to develop</li> <li>Limited collaboration and interaction; no live support</li> </ul>	<ul style="list-style-type: none"> <li>Difficult for client-facing staff in the field</li> <li>More limited collaboration and interaction</li> <li>Potential system limitation with # participants</li> </ul>	<ul style="list-style-type: none"> <li>Potential heavy data requirements</li> <li>May rely on advanced technology or external resources</li> <li>Unless facilitated, no support for staff</li> </ul>
Secondary Considerations	<ul style="list-style-type: none"> <li><b>Primary delivery method</b></li> <li>Most effective method for complex, system-related training</li> <li>Best path forward for large culture changes</li> </ul>	<ul style="list-style-type: none"> <li><b>Potential candidate for training: Specialists</b></li> <li>less system based</li> <li>May need to bring in External trainers</li> </ul>	<ul style="list-style-type: none"> <li><b>Consider for certain roles, or deliver as a part of ILT</b></li> <li>Sustainability considerations:               <ul style="list-style-type: none"> <li>Good option for new joiner training</li> <li>Need to ensure VR can update content for sustainability</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li><b>Consider for follow up/ reinforcement training</b></li> <li>Sustainability considerations:               <ul style="list-style-type: none"> <li>Good option for new joiner training</li> <li>Need to ensure VR can update content for sustainability</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li><b>Consider for specialized roles</b></li> <li>May need to be facilitated</li> <li>Need to define Sustainability process</li> </ul>



# TRAINING EVALUATION/ASSESSMENT APPROACH

## Measure:

- REACTION
- LEARNING
- ADOPTION

## By Asking:

- *How do staff feel about the learning experience?*
- *Has knowledge increased as a result of training?*
- *Are staff applying training?*
- *Are staff satisfied with the training?*

## For the Purpose of:

- Measuring **attitude** to and **effectiveness** of training
- Encouraging **attention** and **participation**
- Demonstrating staff **proficiency**
- Enhancing training and mitigating gaps by identifying staff / roles that need extra **support** and topics that are more difficult to comprehend
- **Updating training** based on staff feedback

## REACTION

### Training Evaluation

- Via Survey Tool
- Provide link to staff in email post course completion or on-site post training

## LEARNING

### Training Assessment

- Questionnaires built into LMS or on-site
- Pulse Check, no pass/fail

## ADOPTION

### Practice

- Job Aids, Simulations
- QA and provide staff feedback on accuracy and quality of application